Handout 3: Shared Risk and Protective Factors for Substance Misuse and Mental Health Disorders

Shared risk and protective factors are factors that have been found to influence *both* substance misuse and mental health outcomes. Prevention efforts that address shared factors are more likely to have a greater impact, as these factors have the potential to improve multiple outcomes. Shared factors can also serve as a catalyst for cross-sector partnerships between the substance misuse and mental health disorder prevention fields—leading to a more comprehensive approach to improving the behavioral health[1] of individuals.

The term *behavioral health* refers to a state of mental/emotional being and/or choices and actions that affect wellness. Behavioral health problems include substance use or misuse, alcohol and drug addiction, serious psychological distress, suicide, and mental and substance use disorders.

The Shared Risk and Protective Factors (SHARP) Tool

The SHARP Tool is an interactive website designed to help prevention practitioners identify factors that are associated with *both* substance misuse and mental health disorders. The Tool includes a list of risk and protective factors identified through a systematic review of research literature.

Research Methods

The shared risk and protective factors on the SHARP Tool are based on the findings of the systematic review of articles and reports published during the years 2000 through 2014. The systematic review builds on the findings and lessons learned from an earlier pilot review that was conducted in 2012. The pilot review led to the identification of a preliminary list of shared factors, which were organized by social-ecological model into four levels and multiple sub-levels. The goal of the current systematic review is to enhance and replace the preliminary list under each social-ecological model level and sub-level. As of December 2014, the systematic review of articles for the school sub-level has been completed.

Social-Ecological Model[2]

The shared risk and protective factors on the SHARP Tool are categorized according to the social-ecological model, which allows us to consider the different contexts in which these factors exist, examine how they interact, and choose prevention strategies that operate at multiple levels in order to achieve the greatest impact.

---

[1] Substance Abuse and Mental Health Services Administration. (2011). *Leading change: A plan for SAMHSA's roles and actions 2011-2014.(* HHS Publication No. [SMA] 11-4629). Rockville, MD.

[2] McLeroy, K. R., Bibeau, D., Steckler, A., & Glanz, K. (1988). An ecological perspective on health promotion programs. *Health Education Quarterly, 15*(4), 351-377.

The four levels of the socio-ecological model include the following:

- **Individual:** Includes factors specific to the individual, such as age, education, income, health, and psychosocial problems, which may correspond with substance use. For example, young adults who are unemployed are more likely to develop anxiety disorders and become dependent on alcohol[3].

- **Relationship:** Includes an individual's closest social circle—family members, peers, teachers, and other close relationships—that contribute to their range of experience and may influence their behavior. For example, children whose parents separate or divorce are more likely to suffer from mood[4] and substance disorders[5].

- **Community:** Includes the settings in which social relationships occur, such as schools, workplaces, and neighborhoods. These factors can have both negative and positive associations with substance use. For example, adolescents who feel more connected to their school are less likely to use alcohol[6] and develop anxiety disorders[7].

- **Societal:** Includes broad societal factors, such as social and cultural norms. Other significant factors operating at this level include the health, economic, educational, and social policies that contribute to economic and/or social inequalities between populations.

---

[3]Mayo Clinic Staff. (2010). *Personality disorders.* Rochester, MN: Mayo Foundation for Medical Education and Research. Retrieved on December 15, 2011, from http://www.mayoclinic.com/health/personality-disorders/DS00562/METHOD=print

[4]Institute of Medicine (U.S.), O'Connell, M. E., Boat, T. F., Warner, K. E., & National Research Council (U.S.). (2009). *Preventing mental, emotional, and behavioral disorders among young people: Progress and possibilities.* Washington, D.C: National Academies Press.

[5]Missouri Department of Mental Health, Division of Comprehensive Psychiatric Services.(n.d.). CPS facts: *Co-occurring disorders in adults.* Retrieved December 15, 2011, from http://dmh.mo.gov/docs/mentalillness/cooccurringadults.pdf

[6]Black, D. S., Grenard J. L., Sussman S., & Rohrbach, L. A. (2010). The influence of school-based natural mentoring relationships on school attachment and subsequent adolescent risk behaviors. *Health Education Research. 25*(5), 892-902.

[7]Smokowski, P. R., Cotter K. L., Robertson C. I. B., & Guo S. (2013). Anxiety and aggression in rural youth: Baseline results from the rural adaptation project. *Child Psychiatry and Human Development. 44* (4), 479-92.

Developed under the Substance Abuse and Mental Health Services Administration's Center for the Application of Prevention Technologies task order. Reference #HHSS283201200024I/HHSS28342002T. For training use only.

http://www.samhsa.gov/capt/ PAGE 2

Systematic Review Findings

The goal of the current systematic review is to build upon the findings of the pilot review, and enhance the preliminary list of risk and protective factors under each social-ecological model level and sub-level. Table 1 includes the list of shared risk and protective factors for the school sub-level as identified by the systematic review. As the findings from ongoing systematic review phases become available, Table 1 will be expanded to include shared factors under additional socio-ecological levels and sub-levels.

Table 1: Systematic Review Findings

Level	Sub-Level	Shared Risk Factors	Shared Protective Factors
Community	School	Exposure to bullying at school Lack of supportive teacher/school staff Poor academic performance Truancy	Academic achievement Feeling safe at school/school safety Positive school climate Rewards for prosocial behavior at school School bonding/connectedness School characteristics/school type (private) School commitment Supportive teacher/school Staff

Developed under the Substance Abuse and Mental Health Services Administration's Center for the Application of Prevention Technologies task order. Reference #HHSS283201200024I/HHSS28342002T. For training use only.

http://www.samhsa.gov/capt/ PAGE 3

Pilot Review Findings

Table 2 includes the preliminary list of shared risk and protective factors for other social-ecological levels and sub-levels (except school) identified by the pilot review conducted in 2012. As the current SHARP Tool systematic review continues, the shared factors identified below are subject to change.

Table 2: Pilot Review Findings

Level	Sub-Level	Shared Risk Factors	Shared Protective Factors
Individual	Employment	Job loss Unemployment Retirement	
	Health Issues	Chronic pain Traumatic brain injury HIV/AIDS Prenatal alcohol exposure Illness/poor physical health Senior impaired health	
	Housing	Residential instability Shelterless/homeless	
	Income	Poverty Low household income/financial problems	
	Psychosocial Issues	Poor self-esteem Aggression or hostile peers Alienation Difficult temperament	Self-esteem

Level	Sub-Level	Shared Risk Factors	Shared Protective Factors
Individual		Rebelliousness High stress Insecure attachment Grief/death of a loved one	
	Religiosity/ Spirituality		Religiosity/spirituality
Relationship	Adverse Childhood Experiences (ACEs)	Psychological abuse Physical abuse Sexual abuse Emotional neglect Physical neglect Household member w/ substance use disorder Household member w/ mental illness Incarcerated household member Divorced parents Witnessed domestic violence	
	Family Conflict/Disruption	Family conflict Family dysfunction and disruption	

Level	Sub-Level	Shared Risk Factors	Shared Protective Factors
Relationship	Harsh and/or Inconsistent Parenting	Harsh discipline Inconsistent parenting Lack of discipline Low parental warmth Parental hostility	
	Parental Involvement	Low parental support Maternal inattention	Parental encouragement Parental support and bonding Positive involvement and reinforcement
	Positive Involvement with Other Adults		Frequent contact with other relatives Access to mentors
	Partner/Marital Problems	Critical, unsupportive partner Significant other with substance use, mental health, or co-occurring disorder Ever abused by a sexual partner Spousal divorce	
	Peer Interaction	Bullying and/or victimization Association with deviant peers Peer rejection Poor peer relationships	

Level	Sub-Level	Shared Risk Factors	Shared Protective Factors
Relationship	Social Connectivity	Lack of social support Social isolation/ deprivation	Social support
	Lifetime Abuse/Assault	Physical abuse Sexual abuse/rape	
Community	Community Stress/Violence	Chronic community disorganization and stress (crime, economy) Acute community stressful events (school shootings, severe tornado) Exposure to violence (witness violent crime, gangs, wars)	
	Community Involvement		Participation in social activities Participation in religious/spiritual activities
	Workplace	Problems at work Grief/death of a loved one	
Societal	Prejudice	Prejudice and perceived discrimination	
	Culture	Lack of cultural identity	Culture

Limitations

The risk and protective factors in this handout were provided in order to help states begin conversations around the benefits of considering shared factors as part of their prevention planning. As the current SHARP Tool systematic review continues, the shared factors identified during the pilot review (Table 2) are subject to change.

In addition, although the factors within this handout are organized according to the Social Ecological Model, it is important to remember that these categorizations are not finite and that many of these categories can overlap depending upon how specific risk and protective factors are measured.