

alcohol use ($p=0.08$). Greater illness acceptance was negatively associated with lifetime electronic cigarette use ($p=0.03$) and marijuana use ($p=0.01$). Greater interpersonal support was negatively associated with days of alcohol intake over the past month ($p=0.05$). Higher resilience scores were negatively associated with marijuana use ($p<0.01$) and past two-week binge drinking ($p=0.05$). Depression (OR 1.31, 95% CI 1.04–1.66), illness acceptance (OR 0.96, 95% CI 0.91–0.99), and resilience (OR 0.32, 95% CI 0.17–0.60) persisted as predictors of marijuana use after adjustment for age and sex.

Conclusions: The prevalence of alcohol and other substance use is significant among college youth with T1D. While psychosocial factors such as depression and anxiety may confer an increased risk of engaging in these behaviors, others such as illness acceptance, interpersonal support, and resilience may be protective – especially against marijuana use. Providers should address these psychosocial factors in order to curb unhealthy substance use and the complications that may ensue in this vulnerable population.

Sources of Support: Boston Children's Hospital Awards Committee Pilot Research Project Funding (FP01017994), UCLA Children's Discovery and Innovation Institute (CDI) Research Recognition Award, and National Institutes of Health Career Development Award (NIH/NIDDK K01DK116932).

186.

PREDICTORS OF POLYSUBSTANCE USE IN RURAL HIGH SCHOOL YOUTH: A LATENT CLASS ANALYSIS

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Purpose: Although polysubstance use is a serious health concern for adolescents, little research has explored this issue in rural youth. Study objectives were to: 1) use latent class analysis to identify patterns of polysubstance use in a sample of rural youth; 2) examine risk and protective factors associated with polysubstance use class membership.

Methods: Data were baseline surveys collected prior to a substance use prevention program implemented in rural high school health classes in 2019. High school students aged 14–19 living in rural Indiana areas with high rates of HIV, HCV, and opioid use completed a baseline paper survey. Latent class analysis (LCA; MPlus v.1.8.6) was used to identify and classify patterns (i.e., classes) of lifetime and past 30-day use both trichotomized: Never [0 days], 1–9 times [days], 10+ times [days] in tobacco, electronic vapor products, alcohol, binge drinking and marijuana. We then used multinomial logistic regression (SPSS, v. 28.0; all $p<.05$) to evaluate the odds of polysubstance use class membership as a function of demographic (gender [male/female], sexual minority [no/yes] and ethnicity [White/LatinX]), risk (adverse childhood experiences (ACEs) [8 items; $\alpha=0.797$], peer pressure susceptibility [5 items; $\alpha=0.929$] and positive attitudes about substance use [16 items; $\alpha=0.951$]) and protective (decision making capability [14 items; $\alpha=0.545$], healthy relationship attitudes [5 items; $\alpha=0.881$], parental communication [3 items; $\alpha=0.886$], parental connection [5 items; $\alpha=0.952$] and school connection [5 items; $\alpha=0.867$]) factors.

Results: The 311 participants were (49% male, 1% non-binary, 87% heterosexual, 37% 9th graders, 54% 10th graders, 9% 11th and 12th graders). 32% reported ever using tobacco, 46% vapes, 57% alcohol, 34% binge drank and 25% marijuana. Use in the past 30-day reports

were lower (14%: tobacco, 26%: vapes, 21%: alcohol, 9%: marijuana). LCA results supported a 4-class solution of polysubstance use (i.e., 4 distinct patterns of substance use): Regular Polysubstance Users (14%), Lifetime Alcohol, Vape & Tobacco Users (17%), Moderate Lifetime Alcohol & Vape Users (19%), and Abstainers (50%). In multinomial regression models, older grade level significantly predicted membership in the Lifetime Alcohol, Vape & Tobacco class compared to Moderate Lifetime Vape & Alcohol class (OR=3.07) or the Abstainers class (OR=3.77). Higher prevalence of ACEs predicted greater odds of being a Regular Polysubstance User vs. a Moderate Lifetime Alcohol & Vape User (OR=1.47) or an Abstainer (OR=1.81). Higher peer pressure susceptibility was associated with being a Regular Polysubstance as compared to a Moderate Lifetime Alcohol & Vape User (OR=1.15) or an Abstainers (OR=1.15). More positive attitudes about substance use predicted being a Regular Polysubstance User (OR=1.19), a Lifetime Alcohol, Vape & Tobacco User (OR=1.16) or a Moderate Lifetime Alcohol & Vape User (OR=1.09) as compared to being an Abstainer.

Conclusions: Rural youth exhibit distinct patterns of lifetime and recent polysubstance use that can be used to tailor interventions. Our findings highlight the importance of trauma-informed interventions that target factors like peer influence and substance use attitudes to mitigate polysubstance use.

Sources of Support: Support for this project is provided to Health Care Education and Training, Inc. (HCET) through Grant Number 1TP1AH000201-01-00 from the HHS Office of Population Affairs.

187.

EXPERIENCES OF DISCRIMINATION, COVID-19 RELATED MENTAL HEALTH AND SUBSTANCE USE AMONG HISPANIC YOUTH

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Purpose: Experiences of discrimination can trigger or exacerbate substance use and mental health disorders. Hispanic youth are disproportionately affected by the consequences of substance use. This study assessed whether experiences of discrimination in Hispanic youth were associated with adverse mental health and substance use during the COVID-19 pandemic.

Methods: Data from an ongoing, IRB-approved study analyzing drug use patterns among Hispanic youth (18–23 years) in the Southern U.S. ($n=55$) was used. Discrimination was measured using a modified Everyday Discrimination Scale with 11 items (yes/no), a Likert scale for frequency, and a prompt asking the reasons (17 options for e.g., race, COVID symptoms) behind being discriminated. Discrimination was defined as responding “Yes” to any of the 11 items (Independent Variable, IV). Participants were asked about their experiences of mental health-related outcomes (i.e., nervousness, anxiousness or being on edge; depression; loneliness; and hope for the future) before and during the pandemic. The difference between the number of mental health related-outcomes (MHRO) experienced was dichotomized into worsened MHRO (i.e., positive difference) or lack of deterioration (i.e., zero or negative difference; Dependent Variable, DV1). Participants were also asked whether during the pandemic they had started to or increased the use of a) drugs, b) alcohol, and c) smoking. “Yes” for any substance was considered substance use (DV2). A logistic regression was fitted to explore the association between IV, DV1 and DV2.

Results: The majority of participants self-identified as White (88.5%), males (51%) and worked at least part time (81.8%). The most common discrimination experiences were 'people act as if they think you are not smart' (22.4%), 'being called names or insulted' (18.4%), and 'people act as if they are better than you are' (18.4%). Participants more frequently perceived that they were being discriminated on the basis of ethnicity (33.3%), gender (33.3%) and sex (28.6%). Approximately 14.3% participants reported discrimination for having COVID-19 or related symptoms. During the pandemic, some participants started to use or used more alcohol (22.9%), followed by smoking (14.6%) and other drugs (12.5%). Compared to before the pandemic, about half (51.1%) of participants reported any MHRO changes and 14.9% reported positive MHRO changes during the pandemic. There was no statistically significant association between discrimination experiences and outcome variables [DV1(OR= 1.3; 95%CI=0.4, 4.4.), DV2(OR= 3.0; 95%CI= 0.9, 10.2)].

Conclusions: Results suggest a tendency for adverse COVID-19 MHRO and greater substance abuse among Hispanic youth who experience discrimination. Small sample size (only 25% of expected sample enrolled), might explain why $p > 0.05$ for both associations. It is important to address discrimination when considering MHRO in ethnic minorities, such as Hispanics. Further research is required to provide insights into coping and resilience factors in this population.

Sources of Support: Supported by the National Institute on Drug Abuse T32 training grant at the UF Substance Abuse Training Center in Public Health from the National Institutes of Health (T32DA035167, PI:Cottler) and Mentored Research Scientist Development Award (K01DA046715, PI:Lopez-Quintero). The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.

188.

SUBSTANCE USE BEHAVIORS AMONG LGBTQ YOUTH OF COLOR: APPLYING A NOVEL METHOD IN TWO LARGE SAMPLES TO IDENTIFY INTERSECTING SOCIAL POSITIONS BEARING THE GREATEST BURDEN

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Purpose: The global COVID pandemic, social uprisings, and a wave of discriminatory policy proposals have highlighted the ways in which structural oppression contributes to health disparities facing youth of color and those identifying as LGBTQ. Young people living at the intersection of multiple types of oppression face the greatest burden, yet also have unique strengths and supports. Existing research has demonstrated persistent substance use disparities across sexual orientation, gender identity, and racial/ethnic groups – as individual categories. However, very little research has examined substance use among those with multiple stigmatized identities. Capitalizing on two very large datasets and a novel analytic technique, this study seeks to identify groups with the highest prevalence of past 30-day alcohol, e-cigarette, and marijuana use. This first step in a larger project will determine key intersecting identities for qualitative interviews regarding interpersonal and community supports that can reduce health disparities.

Methods: Data come from the 2019 Minnesota Student Survey and the 2017-2019 California Healthy Kids Survey, two surveillance programs with a combined sample of 892,664 students in grades 6-12.

Data were harmonized across sources to create compatible variables including race/ethnicity (non-Hispanic Native American, Asian/Pacific Islander, Black/African/African American, White, Multiracial; Latina/x/o), sexual orientation (straight, gay/lesbian, bisexual, questioning, something else [e.g. pansexual, queer]), gender identity (cisgender, transgender/gender diverse [TGD], questioning), sex assigned at birth (male, female), state, and past 30-day substance use (yes/no for alcohol, e-cigarettes, marijuana). Exhaustive Chi-square Automatic Interaction Detection (CHAID) analysis, a decision tree approach, was used to examine all interactions among social positions with the goal of identifying distinct groups with significantly different rates of substance use behaviors (Bonferroni adjusted $p < .05$). The groups with the highest prevalence for each substance were examined.

Results: The overall prevalence of past 30-day substance use was 10.4% for alcohol, 9.7% for e-cigarettes, and 9.7% for marijuana, with substantial disparities across intersecting groups. For example, although 10.5% of Latina/x/o-identified youth and 20.8% of TGD-identified youth reported drinking alcohol, Latina/x/o TGD youth were among those with the highest prevalence of use, particularly those who also identified with a newer sexual orientation label (e.g. pansexual, queer) and were assigned male at birth (26.2%) or Latina/x/o TGD youth who did not indicate their sexual orientation (31.7%). This pattern was also evident for e-cigarette and marijuana use. Similarly, Black TGD youth had significantly higher rates of alcohol (26.9%), e-cigarette (29.2%, in California), and marijuana use (24.4%, straight-identified; 29.5%, missing sexual orientation).

Conclusions: Using the power and diversity of large population-based datasets and an innovative analytic technique specifically recommended for studies of intersectionality, we found significant disparities in substance use, with the burden varying by unique intersecting marginalized identities. This approach is recommended to examine disparities in groups often treated as homogeneous, as a precursor to developing relevant and appropriate prevention strategies. Further research is needed to identify structural factors contributing to these high rates. Clinicians, educators, and others working with youth should address intersecting types of stigma and oppression that may contribute to substance use.

Sources of Support: National Institute of Minority Health and Health Disparities grant #R01MD015722.

189.

ASSOCIATION BETWEEN CANNABIS USE AND COVID-19 EXPOSURE, IMPACT AND DISTRESS AMONG ADOLESCENT PATIENTS

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Purpose: In 2020, schools and businesses shut down and people were encouraged to remain at home due to the COVID-19 pandemic. This study assessed whether different types of COVID-19 pandemic exposures were associated with cannabis use by adolescents and young adults (AYA) seen at general and specialty care clinics.

Methods: Between March 2020 and May 2021, electronic surveys were administered to AYA enrolled in an ongoing longitudinal cohort study that drew on AYA receiving care in either a general adolescent or a specialty care chronic illness setting. AYA reported about past year cannabis use, pandemic experiences, mental health, and socio-