

# Talking About Substance Use with Newcomer Youth in Shared Living Environments

Adolescence is a critical developmental stage during which many young people naturally explore boundaries and experiment with new experiences—including potential exposure to different substances. This tip sheet is for service providers and caregivers who support newcomer youth in **shared living environments**, such as foster homes, group homes, independent living settings, or other communal placements. Substance use concerns in these environments may feel urgent, but an immediate crisis response is not always needed. Below are practical steps to help you initiate conversations, set expectations, and identify when to seek additional support. This resource is not intended to evaluate safety risks, diagnose substance use disorders, or provide clinical guidance.

## 1. Use everyday conversations to set expectations for the living environment.

Discuss clear, consistent expectations around safety, routines, and substance use. Adolescents are developing autonomy and identity, making expectations especially important. Having these conversations regularly can help households respond more effectively if concerns arise later. It can also reduce confusion, strengthen trust, and support smoother placements. **Use structures that are already in place** for these conversations. In communal settings, this may be a monthly house meeting. In foster homes, this may happen during conversations throughout the licensing process. **Explain shared household expectations** and check for understanding. Avoid singling anyone out, and do not disclose a youth's personal history.

## 2. Reflect on any assumptions you may be making.

Adolescence is already a period of heightened risk-taking and emotional intensity. For newcomer youth, grief, trauma, and adjusting to a new environment may add additional challenges. Youth may engage in substance use for many reasons, and it does not define who they are as a person. Gain additional context and avoid jumping to conclusions by taking a moment to reflect on factors contributing to substance use. Recognize that **the behavior does not always tell the full story**. For more on these factors, see [Introduction to Substance Use: Guidance for Refugee Service Providers](#).

**Example assumption:** The youth does not care about their own safety or the safety of others.

**Reflect:** Is the youth using substances to cope with a challenging situation? To feel a sense of belonging? Is their use of substances influenced by their culture of origin?

## 3. Assess impact on the home environment.

In communal settings, the behavior of one young person can significantly affect the sense of safety and stability for others. Adolescents are particularly sensitive to these disruptions in group care.

**Pay attention to changes in mood, behavior, or relationships that may require a response.** You

may notice increased conflict between household members. Trust may feel strained. Routines may be disrupted. Others in the home may feel unsettled or distracted from daily responsibilities. These types of observations can inform your next steps.

#### 4. Gather information with curiosity and respond.

As a service provider or caregiver, it is not your role to investigate or diagnose. Instead, it is to **understand enough to determine helpful next steps**. Use a calm tone and speak one-on-one with the youth and those affected to describe what you observed. Learn what may be contributing to the concern and whether the situation is affecting others in the home. Then, respond by exploring what support may help now. Ask open-ended questions such as:

- *“Can you tell me what has felt stressful or difficult recently?”*
- *“What has it been like trying to follow expectations in the home lately?”*
- *“Who are the people you feel most comfortable turning to right now?”*

#### 5. Revisit expectations and involve the youth in next steps.

Find a private space to revisit household expectations with the youth and discuss next steps. If the youth is currently under the influence, prioritize safety and support rather than having a conversation. Avoid shaming or lecturing, which may increase isolation and reduce engagement. Do not advise a youth to stop substance use abruptly without professional guidance. Instead, explore together what may help moving forward, for example:

- Regular check-ins and adjustments to the youth’s routine
- Mentorship or extracurricular activities
- Culturally appropriate connections, such as trusted adults from the youth’s culture

#### 6. Decide when additional resources are needed.

Some situations may require a higher level of response. **Though not an exhaustive list, consider consulting a case manager or supervisor when concerns involve:**

- Repeated or escalating substance use despite in-home responses
- A need to use the substance to cope or function
- Mental health, medical, or other co-occurring concerns
- Behaviors exceeding staff capacity or agency requirements
- Safety concerns or legal risk

Next steps may include behavioral health, substance use, or family-based services. If referring to additional services, maintain continuity of relationship with the youth to avoid feelings of abandonment. This early intervention can reduce harm and help restore stability.

**For more resources**, see Switchboard’s [resource collection on supporting mental health](#) and the archived webinar [Substance Use among Unaccompanied Refugee Minor \(URM\) Youth](#).

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