





# STEROIDS FOR KIDS?

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# Introduction

Anabolic-androgenic steroids (AAS) are synthetic derivatives of testosterone, prescribed medically to treat conditions such as anemia and delayed puberty but often misused to accelerate muscle growth and enhance athletic performance. When taken without medical supervision, AAS misuse is illegal and can be particularly harmful during adolescence - a critical window for physical and brain development.





### How this impacts the youth

Recent national data show that approximately 3 percent of U.S. high school students report lifetime use of AAS, comparable to cocaine use (4.8%) Additionally, 7 percent of students admit to using steroids without a prescription, and 21 percent know a peer who uses them. Alarmingly, 45 percent of high school seniors perceive little or no risk in using steroids once or twice, despite well-documented harms.



likeliness of death contrasted to non users



Increase in acute cardiovascular diseases

## Why might people use it?



#### Gender

Males report higher AAS use (0.9-6%) compared with females (0.2-5.3%), driven in part by socially constructed ideals of masculinity and strength.

#### Age

Prevalence often increases with age during adolescence, as older teens face greater performance and appearance pressures.

#### **Sports Participation**

Athletes - particularly those in competitive or strength-focused sports - are at elevated risk, seeking an edge in performance or physique.

#### **Peer Pressure**

Influence from teammates, coaches, and gym buddies can normalize or encourage steroid use through direct recommendation or modeling behavior

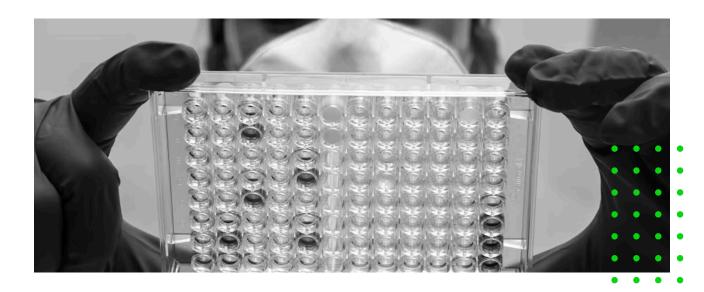
#### **Psychological Variables**

Constructs such as drive for muscularity, aggression, anticipated regret, and social norms positively predict AAS use, whereas self-esteem, resisting peer pressure, and perfectionism are protective.

#### **Co-occurring High-Risk Behaviors**

Adolescents engaging in other risk behaviors (e.g., alcohol misuse, driving without a seatbelt) are more likely to misuse steroids as part of a broader pattern of sensation-seeking.

# Organizations designed to prevent it





#### CDC's Atlas & Athena

School-based programs combining AAS risk education with strength training, shown to reduce steroid intentions and substance use in student athletes.



#### **Drug-Free Communities Support Program (CDC)**

Over 1,000 local coalitions implement mentorship, school policies, and parent outreach to prevent youth substance use.



#### National Institute on Drug Abuse (NIDA)

Provides evidence-based APEDs resources for teens, parents, and educators on AAS risks and prevention



#### **Taylor Hooton Foundation**

Raises awareness through school presentations and parental education to change norms around body image and performance enhancement.

# Conclusion



Anabolic steroid misuse among youth, though less prevalent than substances like alcohol or marijuana, carries disproportionate risks during critical developmental years. Prevalence estimates of 3–7 percent among high school students belie a much larger culture of "performance and imageenhancement" pressures fueled by social norms, media influencers, and peer networks. Multifactorial drivers from gendered body-ideal beliefs to the accessibility of online blackmarket products - underscore the need for interventions that address psychological vulnerabilities, peer dynamics, and educational gaps.

Promising prevention models, notably CDC's ATLAS/ATHENA and community coalitions under the Drug-Free Communities Support Program, demonstrate that comprehensive, school- and community-based strategies can meaningfully reduce intentions and use. Continued collaboration among public health agencies, schools, families, and anti-doping bodies is essential to sustain these gains, reinforce protective factors, and equip adolescents with the knowledge, skills, and environments that support healthy, drug-free development.

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