Psychosocial Attributes of Substance Abuse Among Adolescents and Young Adults: A Comparative Study of Users and Non-users

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ABSTRACT

Background: Substance abuse is one of the major health challenges across the globe. Adolescents are among the most affected. This study aims to examine the reasons for initiation, maintenance of harmful use of substances and abstinence among adolescents and young adults by comparing the users and non-users. Materials and Methods: Accordingly, 40 users and 40 non-users of substances, aged 15-24 years were selected through convenient sampling method. Results: It was found that most of the users had initiated substance abuse during 15-18 years of age, with peer influence, curiosity and sense of growing being the major reasons for the same. ‘Feel good’ and socialization were the main reasons for maintenance. The non-users never gave into substances because of personal values, awareness of the impact on health and family values. Both users and non-users had specific personal reasons for their respective behaviors. Conclusions: Young population would use substance for various psychosocial reasons despite knowing the harmful effects of substance. These findings have specific implications for preventive programs.

Key words: Adolescence, psychosocial factors, substance abuse

INTRODUCTION

Alcohol and other substance use are on the rise among the young across the globe. Studies indicate that substance abuse behaviours generally begin during adolescence whose consequences pose important public health problems.[1] As Ahmad et al.[2] found that substance abuse was negligible among 10-13 year old but a bit marked among 14-15 year old and maximum in 16-19 years of age. In India, the choice of substance among the young varied from tobacco products, alcohol, opioids, heroin to prescribed medications.[3-5] Among the users, the gender differences were significant with regard to the magnitude of substance abuse but not the choice of substances.[3] Therefore, it is essential that we target the young population as substance abuse is associated with several psychological, social, physical, legal and economic problems.

Several psychosocial factors have been associated with substance abuse. Particularly, peer pressure, media portrayal of substance-use by celebrities,[6] lucrative advertisements, attractive packaging and expectations of joy are commonly associated with harmful use of substances by the young.[7] In general, it is widely accepted that peers, social environment, family and subjective factors play a vital role in substance abuse behaviors among the young.

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There are a few studies that looked into the factors associated with initiation and maintenance of substance abuse among the young in India. The limited data indicates two things consistently. Firstly, awareness about the harmful effects of substance abuse alone is not sufficient to contain the substance behaviors. Secondly, peer influence was consistently identified as a source of encouragement for initiation as well as maintenance of substance use. It is also understood that the initial reasons for substance abuse among the adolescents was peer pressure, but it was duly attributed to many reasons such as sources of enjoyment (e.g., partying, celebrating festivals) as well as to escape stress related to love failures, parental pressure (particularly from fathers) and family problems, etc. Both peer and family played a vital role in the initiation and continuation of substance abuse. Studies from the West found that the most popular functions for the use of substances were to relax, become intoxicated, keep awake at night while socializing, enhance an activity and alleviate depressed mood. Nevertheless, peer behaviors and attitudes were found to be very influential on socially impermissible behaviors as substance abuse.

Overall, the review indicates that age of onset of substance abuse is adolescence. There are both personal and social factors responsible of substance use in which peer influence plays a major role. Many initiate and continue to use substances despite being cognizant about the harmful effects of substances. However, much of this knowledge comes from the studies focusing on the substance users only. To get a holistic picture, it is equally important to understand why some people never initiate or refrain from substance use (hereafter, non-users). In this backdrop, this study aims to examine the reasons for initiation, maintenance of harmful use of substances and abstinence among adolescents and young adults by comparing the users and non-users.

MATERIALS AND METHODS

Participants
Participants were from the general population, from various schools, colleges and institutions in the cities where the authors are currently based. The sample consisted of 40 users and 40 non-users, in the age group of 15-24 years. Convenient sampling method, a non-probability sampling technique was used in this study. Inclusion criterion for the users was habitual use of substance without history of dependence. Inclusion criterion for the non-users was 'no history of substance abuse'.

Tools
A questionnaire was designed to collect the detailed information such as the demographic details, family details, family history of substance use; reasons for using or not using substances; perceived factors for maintenance and relapse etc. Questions regarding the initiation, progression, maintenance, abstinence, relapse and potential factors for behavior change were meant only for the substance users. Questions regarding the motivational factors for not taking substances were only meant for the non-users. All the questions about substance abuse were open-ended.

Procedure
Prospective participants were identified by the word-of-mouth publicity about the study. During the first contact, the purpose of this study was explained and informed consent was obtained. Every participant was screened individually for substance-related diagnosis by following the International Classification of Diseases-10 criteria and interviewed using the questionnaire described above. For ethical reasons, the information revealed by the individual was not verified with any other source. Data was analyzed using the Statistical Package for Social Sciences for Windows, Version 18.0 by IBM, New York, US. Descriptive and inferential statistics were used as per basic assumptions.

RESULTS

There were no significant differences in age of the users (mean = 20.30; standard deviation (SD) = 2.69 years) and the non-users (mean = 20.80; SD = 2.39 years). Majority of the substance users were males (75%) while the majority of the non-users were females (62.5%). Both groups were matched for education, religion, type of family, parental education and occupation. Family history of substance was significantly high among the users (55%) as compared to the non-users (20%).

Analysis of the age of onset of substance indicated that 6% initiated substance use during 10-15 years while 57.5% had initiated during 15-18 years and the remaining during 18-25 years. With regard to the context for substance use, 15% reported it alone while 17.5% reported that they take substances mostly in social settings and the remaining (67.5%) reported of using substances in social settings only. About 80% continued to use alcohol and smoking while remaining moved on to use various other substances. Main reasons for initiation were peer influence and curiosity. Results also showed that 82.5% of the users never thought of quitting the habit while reaming attempted to abstain from substance use on health, religion and other reasons but failed in their attempts ($\chi^2 = 98.50; df = 4; P < 0.01$). For 85% of this group, which neither thought of quitting nor succeeded in quitting substances, the perceived positive effects were far too many to abstain from substances.
Majority (75%) of users reported that they use substances for ‘feel good factor’ and among the remaining, 22.5% used it while socializing and 2.5% as a stress buster, which is significant ($\chi^2 = 33.65; \text{df} = 2; P < 0.01$). Table 1 indicates that 50% of the users did not see any reason to quit substance while 17.5% were not sure if there are any factors that would help them quit substances.

Separate analysis of the data indicated that 80% of the non-users were sure that they would not use substances at any point in the future even if the situation demanded it. The remaining 20% reported that they were not sure of staying away from substance in future, but very confident that they would not be using substances in the following years. This finding is statistically significant ($\chi^2 = 14.40; \text{df} = 1; P < 0.01$). Reasons for not using the substance were analyzed and reported in Table 2, which indicates that the majority of the non-users cited personal values (74.5%), perceived negative impact (67.6%) and family values (57.5%) as the major reasons for never using substances.

**DISCUSSION**

Substance abuse is fast becoming one of the major health related issue for adolescents and young adults. The National Household Survey of drug use[13] was the first to make a systematic effort to document the national-wide prevalence in India, which indicates that substance use such as alcohol (21.4%) and use of other primary substance such as cannabis (0.3%) and opioids (0.7%) are widely used. The incidence of substance use is notable at this stage because adolescence is the time for experimentation and identity formation. Since adolescents and young adults are at the stage of transition and occupy the delicate and sensitive position in the society, it is important to look at various factors associated with substance abuse.[14] There are several psychosocial problems that are seen among adolescents and young adults because of which it is observed that they get into unhealthy habits such as substance abuse. Though there could be some biological predisposition, understanding the psychosocial factors will help us prevent the problem by manipulating the same. In this context, the present study was designed with the main purpose of finding out the psychosocial factors associated with the use of harmful substance. To study this, two groups of substance users and non-users were selected from the community. Both groups were matched for age and socio-demographic variables.

The present study shows that the majority of users was males (75%) and had initiated substance between the age ranges from 15 to 18 years. This finding is comparable with a study by Ahmad et al.[15] who found that most of the users were within the age range of 16-19 years. Similar pattern has been reported in other regions as well,[15,16] suggesting that adolescents are at high risk for substance abuse behaviors. History of family substance use was higher among the users as compared to the non-users. This finding suggests the role of genetic vulnerability or psychosocial environment or both in precipitating substance abuse behaviors. Nonetheless, this finding is in line with a previous finding, which indicates that adolescents who indulge in substance intake have a strong family history of substance use.[17]

Majority of the users were aware of the potential negative effects of substances, but initiate substances out of peer influence and curiosity. Among all these factors, peer influence on the initiation of substances is well-documented, even to the point of being single most predictor.[16,18-20] Most of the participants of this study reported of starting with alcohol, smoking or combination of both and mostly stuck to the same substances. It needs further exploration to understand the reasons behind it. However, the reasons for continuing substance use behavior was for ‘feel good factor’ and ‘need for socialization’. Together these factors included ‘getting high and escaping stress’, ‘sense of belongingness with peer group’, ‘feelings of grown-up and exercising autonomy’. In essence, amplified positive affective state may be associated with substance abuse.[21,22] This may even explain why majority of the users in this study did not try to quit substances and felt that there are not any potential factors that would help them change their behavior. On the other hand, it was found that the non-users were never interested in substances mainly because

**Table 1: The potential factors that would help change behavior**

| Factors                                      | User n (%) | $\chi^2$ (df=4) |
|----------------------------------------------|------------|-----------------|
| No reason for changing                      | 20 (50)    | 27.5**          |
| Don’t know/not sure of any factors that would help quit substances | 7 (17.5)   |                 |
| After achievement (academic and job)/marriage | 9 (22.5)   |                 |
| Change of friends/social environment         | 3 (7.5)    |                 |
| Proper motivation                            | 1 (2.5)    |                 |

**Table 2: The preventive factors for substance abuse**

| Reasons                                      | n (%)    | $\chi^2$ (df=4) |
|----------------------------------------------|----------|-----------------|
| Personal values                              | 29 (74.5)|                 |
| Perceived negative impact on health and unproductive value | 27 (67.5)|                 |
| Family values                                | 23 (57.5)| 30.0**          |
| Witnessed people suffering from substance abuse | 6 (15)   |                 |
| Against religious values                     | 5 (12.5) |                 |

**P<0.01; Note: cumulative percentage is more than 100 as responders given more than one answer**
of personal values. Awareness about the adverse impact on health and family values were only secondary factors in preventing them from substance use. This finding reiterates that knowledge about harmful use of substances is not sufficient to prevent harmful use of substances among adolescents.\(^{[22]}\) This finding may suggest that some people are never interested in substances therefore studies are required to look into the characteristics of such people to come up with appropriate prevention programs in the form of building up specific qualities seen in non-users.

Overall findings may suggest that users could not resist peer pressure and curiosity and went on to maintain substance use behavior justifying the ‘feel good factor’ while the non-users had a strong personal conviction that substance use behavior is not productive. Both of them were aware of the negative impact of substance on health but only the non-users were conscious of the fact. Very few non-users had a family history of substance and not surprisingly majority of them cited family values as a potential reason for not getting attracted to substances. These findings suggest that there is a need to initiate necessary educational programs for the adolescents during early adolescence, that is, before the age of 15 years. Such programs need to address issues such as resisting peer pressure, finding healthy avenues to feel good about self, family history of substance and family values related to substance use behaviors. There should be consistent, regular reminders on the negative impact of substances on health. Since individual values and perceptions were found to be the primary reasons for both users and non-users for initiating and not-initiating substances, respectively; individual-focused prevention programs may be considered while working with adolescents.

The present study has some limitations. Gender distribution was not comparable between both groups. The sample size was too small to assess various other reasons for substance indulgence among the users. Information given by the participants was not verified through secondary source and therefore possibility of some degree of confabulation could not be ruled out.

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