

Understanding Attitudes of Young Adult towards Substance Use

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ABSTRACT

The aim of the present study was to understand the attitudes of young adults towards substance use using semi-structured interviews. The sample consisted of eight young men and women (18- 24 years) who were identified through purposive sampling. They were recruited for the study after meeting the inclusion criteria of never having tried a substance. Thematic analysis was done to analyze the data from the interviews. The paper sought to understand the attitude on various domains such as, the experiences of individuals, the situations they dealt with, role of different agencies that contributed in their staying away from substances and their general awareness and outlook towards substance use. The analysis of data elicited four global themes in the participants who have never used a substance. They were awareness, attitude, resisting factors, and peer pressure. Factors such as awareness of consequences of drug use, rules and regulations of family, the cultural origins as well as factors related to self, such as self-sufficiency and self-regulation contributed to participants attitude towards substance use. This data can be used in formulating more specific and efficient treatment modules, for individuals who abuse substances.

Keywords: Alcohol, Attitude, Marijuana, Media, Substance use, Young adults

Substance use can be understood as the administration of alcohol, nicotine or other psychoactive substances that may be legal or illicit. Substance use can lead to a cluster of psychological, social and biological consequences. These may result in impairments in the persons biological, psychological or social well-being or may result in consequences such as a strong desire for the intake of the substance, difficulty in controlling the intake of the substance, continuation of the intake of the substance despite the knowledge of the harm it's causing, interference of the drug usage in a person's daily activities and responsibilities, an increase in tolerance and withdrawal symptoms on absence of administration of the drug (World Health Organization, n.d.).

A substance use disorder leads to clinically significant impairment and distress. It involves a use of psychoactive substances, alcohol, tobacco etc. The over-usage of these substances can lead to psychological consequences which might also effect education, work performance, cognitive functioning as well as impairment in interpersonal relations (Lyns & Hall, 2000)

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(Bugbee, Beck, Fryer, & Arria, 2019). Substance use is accompanied by some physiological effects as well. There are consequences that can lead to psychosis, suicidal thoughts, anxiety, and tendency to engage in violence. (Zimmerman, 1999; Estroff et al., 2017; Carney, 2017). This condition usually begins with experimental use of a substance mostly for recreational purposes. The review of literature indicates that friends and peer often act as a reinforcing factor for substance usage. Often a person also starts associating with the social identity of the group the person is a part of. Studies show a high correlation between relapse rates in substance use and the strength of the social identity of the person (Dingle, Stark, Cruwys, & Best, 2015). However, the peer group and attitudes of individuals are yet to be explored in depth. (Lundborg, 2006).

Substance use and consequently its abuse is a common phenomenon seen among young adults. In a survey conducted in 2010, it was found that approximately five percent of the young adult population (230 million) tried an illicit drug at least once. Out of these, twenty seven million were found to have “high-risk” consumption of substances that posed a threat to their health, caused psychological problems as well as social problems. In 2015, substance use disorders alone caused approximately 307,400 deaths. This figure shot up from 165,000 deaths in the 1990’s. Of these, the highest contributors are from alcohol use disorders, opioid use disorders, amphetamine use disorders, and cocaine use disorders, contributing- 137,500 , 122,100 , 12,200 , and 11,000 respectively. Not only is substance use common in itself but also has a high prevalence due to it’s potential co-morbid nature with most other disorders (Lai, Cleary, Sitharthan, & Hunt, 2015), (Nelson, Van Ryzin, & Dishion, 2014). Therefore, it is important to understand the attitude young adults hold regarding substance use to develop future mitigation measures.

Some researchers have used the Affect-Behaviour-Cognition model to understand attitudes of people. According to this model, an attitude can be understood in three components. The Affective component includes a person’s feelings or emotions towards a particular attitude object. For example, “I am scared of street dogs.” In the behavioral component, the attitudes we have influence our actions or behavior. For example, “I will avoid street dogs and scream if one comes near me.” In the cognitive component, it involves the beliefs and the knowledge that a person has about an attitude object. For example, “I believe street dogs are dangerous.” This can also be used to understand the interplay of the affective, behavioral and cognitive components that influence peoples attitude towards substance use which further influence their choices to either use it or not use it. Using this model one could assume that if an individual’s affect regarding substance use is to feel scared of substance use or if the idea of consuming substance triggers certain negative emotions, the individuals behavioral response would be to avoid substance use and the environments where substance use is “more active”, the underlying cognition will probably be that substance use is dangerous or hazardous for one’s physical or mental health. So it would be safe to say that affect, behavior and cognitions can be clubbed together to form an attitude towards the use of substances. This attitude influences whether or not the person will use substances. (Simons & Gaher, 2004). The Affective, Behavioral and Cognitive component’s intertwined nature influences attitudes. However, sometimes single components can be dominant enough to influence the person (Rooke, Hine, & Thorsteinsson, 2008).

It is well known that cognitive deficits, early stresses or trauma in life such as childhood abuse, a stunted childhood or even living conditions have an impact on the use of substances later in life. This has been reiterated by a sea of literature that aims to find the causes of

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substance use in adolescence and in young adulthood (Shoal & Giancola, 2015; Anderson, Willer, Kilduff, & Brown, 2012; Mandavia, Gabriella, Bekh, Kerry, & Powers, 2016; carliner, et al., 2016). However, there is not much light shed on the perception and attitudes of young adults towards the idea of or the actual use of substances. Studying the perception and attitudes of young adults towards substance use is very relevant because research has strengthened the bridge between attitudes and substance use (Ponnet, Wouters, Walrave, Heirman, & Van Hal, 2015).

This paper aims to build on what are the factors that form this attitude towards substance use. The ABC theoretical model has been used to understand this and to give structure to this research. The main focus of this study is to find out the factors that form the attitudes of people who have never consumed a substance and to use these factors to help mend the pro use attitude of an individual who cannot control ones use. Based on a sea of literature, an individual will have lower chances of relapse if his or her attitude is in congruent with the concept of substance use. This is not a classical study that can be conducted and be referred to for decades, rather, it needs constant updating as the attitudes of individuals are dynamic due to multiple factors present in their environment. Being up to date with these attitudes and trends will not only help in an updated literature, but, will also be effective in achieving the objective of tailoring existing substance use interventions so that they can become in sync with the current attitude of the target population. This study will bring to the surface certain factors that will also help interventions be more culturally appropriate or relatable as different age groups, cultures, regions will have different factors for using or not using substances. To understand this better one can refer to studies that show a higher prevalence of substance use in war stricken countries or poor communities. (Lien et al., 2016; Murry, Berkel, Gaylord Harden, Linder, & Nation, 2011). Similarly, there are different factors for different contexts. Hence, a study like this is very relevant but very specific to culture, region, socio- economic factors etc.

Research suggests that substance use interferes with the individuals personal, familial, and social life. Substance use disorders can pose a threat to well-being at both personal and social levels. Therefore this becomes a concern not only for the individual but also for the society at large (Lynskey et al., 2016; White, 2014). Substance use disorders is one of the most widespread disorders that can be found in people of all ages and all walks of life (Han, et al., 2017). This study focusses on the young adult population as they are the ones who bear the future of the country, of their loved ones, but most importantly, this is an age group that demands rapid changes emotionally, socially and psychologically and hence this makes young adults at an increased risk of using substances (Lynskey et al., 2016). The study is significant because with more and more open access to media and with progressively stressful lifestyles that have crept into our lives, substance usage has also been influenced (Moreno & Whitehill, 2014). Studies show the role and influence of mass media on depiction of drugs, drug use and drug users(Montagne, 2011). So much so that repeated referrals to substances in songs or exposure to on screen smoking predicts higher chances of the individual using the substance as compared to individuals who have not been exposed to media with content similar to what has been mentioned above (Primack, Douglas, & Kraemer, 2010; Shmueli, Prochaska, & Glantz, 2010).

With changing trends in media, occupational culture, family structures etc. it would not be fair to not know the attitudes of people towards substance use in the current scenario (Lynskey et al., 2016).

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It is therefore important to know the attitudes of individuals towards substance use so that these attitudes can be worked upon on a personal or a societal level to counter the problem. Also, being updated on the attitude towards substance use can facilitate specially designed prevention programs that would aim at changing attitudes in individuals who seem to have a diathesis to use substances due to the currently held attitude.

METHOD

Research Design

A qualitative research design was used for the study. Data was obtained through conducting in-depth semi-structured interviews. A qualitative research design was suitable because it provided a rich and detailed understanding of the topic. A qualitative research design helped answer the why's and how's of the topic and also facilitated exploration of different factors related to the topic, which was one of the objectives of the study.

Participants

The study covers the population of young adults (18-24 years of age). A sample size of 8 was chosen for the research. The sample was equally represented in terms of gender and geographical location, with four boys and four girls from the northern and southern parts of India. Purposive sampling technique was used to select participants for the research. All the participants met the inclusion criteria of never consuming any substance.

Data Collection

A semi-structured interview schedule was prepared to gather information from the participants. After a careful review of literature and settling on the methodology, the researcher pondered on the questions for the interview schedule, where each question was fundamentally assessed and the important questions were examined. The similar questions were put together to guarantee a smooth stream. The interview schedule was concluded subsequent to the input given by the guide. The finished interview was validated by the three specialists from the field of psychology.

Procedure

Proper rapport was established and all ethical considerations were met. The participants were thoroughly explained about their rights such as the right to withdraw at any point in time during the study. Details regarding confidentiality policies and voluntary participation were clearly explained to the participants before taking the informed consent. The participants were explained that all the data will be stored in password protected computers and would not be shared with anyone except with the supervisor for better understanding of the information. A conducive environment was maintained to elicit maximum information. The interviews were audio recorded and detailed transcripts were prepared and analyzed through using thematic analysis.

Data Analysis

The collected data from this interview was analyzed by doing thematic analysis. Thematic analysis is one of the most commonly used techniques of analysis in qualitative research. Thematic analysis is a method that recognizes, evaluates and reports patterns (themes) within the obtained data. It organizes and describes the data obtained in an in depth manner, it also interprets various aspects that happen to come up in the research topic. However, there is no such clear or rigid method about how one can go about conducting a thematic analysis.

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This method illuminates techniques like pinpointing, inspecting, and recording the patterns or themes that are drawn from the data and are involved in the development of a comprehensible reading of the text, the researcher's interventions shall also be a part of the text to be analyzed. Themes are patterns that are drawn from different sets of data that are important to the explanation and illumination of a phenomenon and are linked to the specific research question. The themes become the categories that will be analyzed.

Thematic analysis is conducted by the process of coding in phases so as to create an established, meaningful pattern. It is appropriate to choose thematic analysis as the method for this study as the aim is to explore the various attitudes towards substance use that underlie in the young adult population.

RESULTS

This study explores the underlying factors that affect the stance of Indian young adults regarding the use of substances. The participants in this study have been screened to have never used any substance in their lives.

The analysis followed was that of thematic analysis which involved generation of basic themes using a priori followed by emerging themes. The basic themes were then consolidated into organizing themes and finally into global themes. The themes that developed are given in Table 1.

Table 1, Thematic Organisation Table with Global, Organizing and Basic Themes

| Global themes | Organizational themes | Basic themes |
|--|---|--|
| 1.Substance use: a need of the hour to address | 1.1 Knowledge and attitude of Substances 1.2 Restricting Factors | 1.1.1 Awareness of different Substances 1.1.2 Consequences of substance use 1.1.3 Attitude towards substances 1.1.4 Attitude towards self use 1.1.5 Attitude towards others use 1.1.6 Fluidity of attitude 1.2.1 Self 1.2.2 Family 1.2.3 Other factors |

DISCUSSION

1. Substance use/abuse: a need of the hour to address

Substance use is all around us, ranging from mild forms like tobacco to severe forms such as heroine. All the participants were from the young adult population, it was seen that majority of the participants had encountered a substance being used around them. In a study in India, the total prevalence of substance abuse was found to be nineteen percent. The mean age that marked the onset was twenty five years. (Dadwani & Thomas,2016). This indicates an urgency in terms of understanding the attitudes of young adults aged 18-24 and use the elicited factors to update existing therapies for substance use.

1.1 Knowledge and attitudes of different substances. Awareness refers to the ability to directly know and perceive, to feel, or to be cognizant of events. Broadly, it can be referred to as the knowledge or perception of a certain fact or situation. In context to this research, awareness refers to what a person knows about a particular substance or substances in general. A person's awareness has a deep impact on the actions of a person (Alhosani et al., 2015; Duke et al., 2015). A lot of studies also show the varied short term and long term consequences or effects that a substance can have on a person's biological, perceptual and behavioral being. (Broyd, Van Hell, Beale, Yücel, & Solowij, 2016).

1.1.1 Awareness of different substances. A common trend was observed where all the participants knew what substance use was. All participants had a fair understanding of what is called a substance. One participant's understanding of substances was mentioned in the interview "*substance will be something that changes a brain's activity. Something like psychoactive drugs that I'm aware of, it changes the perception, it changes the way we act. Therefore, that would be a substance for me.*" (P5, personal communication, 2018). Majority of the participants in the study knew about the different kinds of substances that are present. One of the participants mentioned "*alcohol, drugs, opioids, cannabis and other psychotropic drugs to name a few.*" The most common substances that were mentioned by the participants were alcohol and nicotine (Verenkar & Vaz, 2018), (Rani, M; Bonu, S; Jha, P; Nguyen, S N; Jamjoum, 2003). However, only a few participants had ever encountered someone consuming an illicit substance in their vicinity. One of the participant who had encountered such a situation reported "I've been around weed or ganja smokers, I have come across coke one or two times. I have heard about shrooms, lsd, etc but I've never seen anybody consume it around me." Most participants had just encountered alcohol and nicotine use around them. Across the narratives it was seen that the participants did have a fair understanding of substance use and the different types of drugs. This points to the fact that the participants in this study voluntarily chose to stay away from substance use and not because they didn't know about it altogether.

1.1.2 Consequences of substance use. A sea of literature exists that sheds light on the effects or consequences of substance use. These consequences vary from biological, perceptual to behavioral. A participant reported why he has never tried a substance as he believes that trying it once could cause a craving to do it again, he remarked "No, because I told you, it creates impulsive behaviour. See, I love chicken most. So, if you try chicken biriyani from the hotel and you like the taste, then you would want to have it again and again. Every time you cross the hotel, you'd want to have it. It is called craving. So, the craving increases, and then you go to the hotel and have it. The same happens in case of substance too." (P6, personal communication, 2018). Another participant explained the risks to consume substances due to one's altered perception and control (Anilamert, Narin, Aydin, & Acikkol, 2018). The participant said "If its altering your perception, there are some chemical changes going around in your brain. The changes that are happening, what kind of effect do they have, are they short term or long term, desirable or undesirable. Which situation you are using the substance in also matters. If it's a mind-altering substance used in a crowded place, you might not have control over your mind or body, and someone might steal from you or sexually harass you. So mind alteration in itself is a serious side effect." (P2, personal communication, 2018). Some participant also knew the effects of certain drugs, a participant exclaimed while describing his friends "If they had 100 rupees, they'd rather buy a cheap packet of

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gaanja than food. I never understood that because after smoking up, you'd be even hungrier.” (P1, personal communication, 2018). Through the responses of the participants it was seen that being aware of the consequences associated with drug use played a huge role in influencing the decision of the participants to not try a substance.

1.1.3 Attitude towards substances. A disposition or a tendency to respond or feel a certain way towards a particular idea, object, person, or situation. In context of this study attitude has been explained through the Affective- Behavioral Cognitive model. A persons attitude has an influence on the choice of actions of a person as well as his or her responses to challenges. The attitude of a person towards substances can help predict whether the person will go on to consume a substance or not. (Payne & Lee, 2017). The strength of the attitude depends on the exposure of the person or the factors that led to formation of that attitude (Bassili, 2011). An attitude is not easily changeable, however over time, with evidences and experiences that a person comes across an attitude might mend according to the new piece of information (Gawronski et al., 2018). An attitude is a general and lasting positive or negative opinion or feeling about some person, object, or issue. Attitude formation occurs through either direct experience or the persuasion of others or the media (Bassili, 2011). The participants in this study reported different sources that helped form their attitudes towards substances. For one participant, the exposure he got from his friends “scared him”, this also influenced his attitude. As seen in P1’s response “So, when they went back to their homes for two months during vacation, they were going mad. They needed the weed, but they didn't get any. So, they're mind couldn't function without weed. They were like, "I have class, so I'll get stoned. I have to eat, so I'll get stoned so that I can eat better. I have a presentation, so I'll get stoned so that I can talk without fear." They even came stoned to exams. So, that dependency scared me a lot and influenced me.” (P1, personal communication, 2018) A participant reported “while growing up, when I was young, I heard about my seniors doing it and then the school management would tell us how bad it is, etc. The school authorities spread awareness to address an issue of substance use in the participants school. This was influential on the participant.” (P4, personal communication, 2018) One participant also said that the portrayal of substances promotes it's consumption, but he does not consume it because he understands these strategies. P2 reported that “ I think one of them is the way substances are depicted in our society as being something cool. Like the way its presented by your peers and first of all the media. Like in most of the current songs and movies you see the drug users being depicted as being cool and they're just talking about this many glasses of vodka or this many glasses of alcohol. I think it is glorified. Substances are being glorified because these companies are paying heavily for the advertisements and they create a perception of these substances being really cool. And there is not nearly as much effort put in creating awareness for the harm it can do to you personally or socially, so I think that is one of the biggest reasons that in our society it is being portrayed as something glorious, to use any kind of substance. The kind of awareness you have affects your attitude towards substances.” P2 also shared experiences from his early childhood that helped form his attitude towards substances, “my grandfather was a regular drinker and smoker. So even in his last days when the doctor had specially advised him to abstain from alcohol and tobacco and even when he was on his death bed, when his son was worried about him, his grandchildren were worried about him, all that he wanted was the substance.” (P2, personal communication, 2018) Most participants had sources such as personal experiences, awareness spread by

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authorities and media campaigns that influenced or helped form their attitude towards substances.

1.1.4 Attitude towards self-use. A common trend was observed where in all the participants reported a negative attitude towards using substances themselves. No participants were not in favor of the idea of using substances when asked if they will use it. There were various reasons for this attitude. One of the participants reported that “So the reason why I have never used drugs is that I’ve always been more aware of the negative consequences associated with it. So the newspapers would always have something negative about alcohol use, or something about marijuana, cocaine, something. So I would always associate negative things to it.”(P5, personal communication, 2018).

1.1.5 Attitude towards others use. Interestingly, it was observed that when the participants were asked about their attitudes regarding others using the substance , majority of the participants reported a neutral stance. This was incongruent with the attitudes that they had regarding self-use. One participant mentioned, “Well, I would never do it myself, but I wouldn't stop anyone from doing it unless it becomes extremely dangerous for them. I believe that every substance, in a small percentage, will help you. Even weed is used in many hospitals abroad to calm down the restless patients.” (P1, personal communication, 2018). Another participant brought to light a point with her remark “ I believe that people can make their own decisions once they are of certain age. I believe that okay if the law permits you to drink at around 21, there must be some reason that they’re allowing to booze, so I guess yeah, they think we are developed enough to make decisions. So I choose not to drink because I know about the consequences and others can choose to drink or not because they can either. I guess everyone knows about the negative effects of the use of drugs, but they just choose to ignore it. So I do not try to tell anyone to reduce the use of drugs unless you know, it’s going out of way. So If somebody uses drugs, I’m okay with it for them, not for me.” (P5, personal communication, 2018).

1.1.6 Fluidity of attitude. Fluidity in context of this study refers to the flexibility of the attitude that the person has regarding substances. This flexibility or fluidity was explored with the help of hypothetical questions as well as research evidence that shows a change in trend of substances like marijuana and how it is being used in health care services due to its proven benefits. These questions were extracted from literature that pointed towards how concurrent evidences can help change an existing attitude.(Hayes et al., 2015). It was also seen that some of the participants had fluidity or flexibility in their attitudes towards substance use. One of the participant, who’s attitude was a little fluid regarding substance use referring to certain circumstances, reported that “ So maybe using a drug short term is alright. So I would say it fine to use morphine in a hospital setting because they have been given it in the right dosage. But when it comes to recreational purposes, you do not have a controlled administration of the drug. So I believe that at that stage you can go a little bit wrong because there is no one to stop you from all that. That’s why I sort of debate that recreational drug use is still a bit risky, but it is not wrong.” (P5, personal communication, 2018). Another participant exclaimed that “some people like I mentioned, tried because of curiosity, so that’s okay if they are trying once, twice ,thrice so or occasions like social gathering like marriages let’s say cocktail party or maybe with friends but as long as it is occasional it is fine. It’s not

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wrong because it's more like a personal choice and when it is in limits it's fine, that's what I mean." (P3, personal communication, 2018.)

1.2 Resisting factors

Resisting or protective factors are the traits, conditions or attributes that act as factors in the individuals, families or communities way of functioning or dealing effectively with life events and situations. Protective factors are important because they eliminate the risk or cushion the individual towards certain things (Banyard, Hamby, & Grych, 2017). In context of this study, protective factors refer to the factors that have helped individuals resist substance use even when it was being used all around them in certain situations. It was brought to light through the participants responses that awareness of the negative consequences as well as media trends, negative experiences in the past, a high power of self, Family, presence of support systems, fear of addiction and religion/culture were the main reasons for them to resist indulgence in substance use.

1.2.1 Factors within Self. These are factors that influence an individual and come from or lie within the individual. One such factor elicited was *Self Sufficiency*, in context of this study, self-sufficiency refers to the individuals' belief or feeling of self-sufficiency that she or he can get the desired outcomes without the use of substances. Self-sufficiency also includes the individuals skill set that makes them capable of achieving the desired outcome without the use of substances. A participants narrative showed her feeling of self-sufficiency, "if I do want some fun some disinhibition that the drug promises to give me, I'm already able to do that. I feel like I have that control in myself to let myself loose as well. So most people whomever I've heard using drugs, I've asked them why to do they use it, they say that "I can't just let myself go, I can't let myself be more disinhibited to dance. I need a drug, I need alcohol" (P5, personal communication, 2018). But I don't need it to dance, I just can dance. So for me, alcohol or any drug has never provided any amount of control in my life." Participant P5 expressed how she had learnt to "let go" and hence she does not need a drug like most of her friends just so that they can dance for instance. Another factor was *Alternate mechanisms*, a participant reported "I thought that if I needed to go to that other place, I could do it through meditation. I don't need a substance for that" (P1, personal communication,2018). The participant expressed this in context to sharing how his friends smoke a lot of marijuana as they can stay calm and focus. However, the participant reported that he uses meditation techniques to reach the same outcome.

1.2.2 Factors within Family

Family plays a role in determining substance use outcomes (Van Ryzin, Roseth, Fosco, Lee, & Chen, 2016), (Soloski, Kale Monk, & Durtschi, 2016). The influence of family is very evident, be it influence due to past experiences, family rules and regulations or trust endowed by family members.

A factor elicited was *Trust*, a participant shared her narrative that said "yeah I've never crossed that range and I think that's what built this trust. She's never stopped me from trying things, but she always wanted me safe. That's what she always told me. So yeah, the trust has built over years. So they gave me a comfort as well as they gave me boundaries which she would not have liked me to cross. So I'm aware of that I abide by that." (P7, personal communication,2018). The participant had freedom but within certain limits and she sees crossing these limits as a breach of her mother's

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trust. Another factor was *Past Experiences*. Past experiences or encounters have accounted for a large part of influencing people into not consuming any substance. In the study, half of the participants had witnessed a family member facing problems due to their substance use behaviour. This is the major reason as well for these participants to not indulge in the use of substances. A participant reported, “ My grandfather was a regular drinker and smoker. So even in his last days when the doctor had specially advised him to abstain from alcohol and tobacco and even when he was on his death bed, when his son was worried about him, his grandchildren were worried about him, all that he wanted was the substance. He was a really good man, but he had that craving for it that let me have just one more glass of alcohol or one more cigarette...” (P2, personal communication, 2018). The participant reported that he alongside his brother promised that they will never consume any substance. This was mainly due to their experience with their grandfather. Another participant reported that one of her uncles had passed away due to heavy smoking and how that had affected her. P3 said “ I think my attitude towards substance use is quite negative. I have personal reasons for it. I have seen some of my family members health getting affected because of substance abuse. So one of my uncle was diagnosed by lung cancer because he had been taking nicotine for a long time, he smoked a lot .Although he left ,he was been able to get rid after that for some time but somehow because of that his lungs were affected and he developed lung cancer , and, he was diagnosed in an advance stage so , he passed away, so that incident really affect me.” (P3, personal communication, 2018). A trend of awareness of the consequences of using substance as well as negative associations between substances and health was seen. This influenced half of the participants to not consume a substance.

1.2.3 Other Factors

One factor that was elicited was *Fear of addiction*. One of the major effects of substances is the feeling of euphoria and uplifted mood that follows the administration of the substance. This feeling differs in intensity according to the type and the amount of substance consumed. Nevertheless, all substances do have a feel-good factor to them. Interestingly, it was observed that more than half of the participants had never tried a substance due to one of the major contributing reasons of the chance of actually liking the substance and getting into the loop of using it again and again. This seems to stem from the increased awareness about the properties of narcotic substances (Woodworth & McLellan, 2016). One participant reported how she lacks self-control for a lot of things and hence does not want to try a substance, “No, I don't have much self-control even in case of other food. Like, I plan everything in advance. I plan that I would not eat outside much or order food from outside much. But then as soon as I open the Swiggy app, I just get tempted so much that I cannot control myself. So, maybe the concern stems from the fact that if I cannot control my food habits, maybe I wouldn't be able to control my alcohol habits either if I start drinking. So, I just don't want to even start it.” P4, personal communication, 2018). Another participant shared his narrative, “I'm more afraid that since I've had it in my family and my ancestors could develop such dependence so I have that in myself too and I might get affected. Because like other people I might get dependent too and that is why I stay away from substances because you never know when trying can turn into another one and then dependence.” (P2, personal communication, 2018). P2 was scared how he might get hooked to substances if he tried it. A participant shared, “ I was stopped by my own experiences in the past and

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how rigid lines I've made for myself because I actually don't know how my biological or physiological response to a substance will be, it can be anything. Positive or negative, either way it can cause problems." (P7, personal communication, 2018) It was seen that fear of addiction had different sources like an experience as in case of P2, self-awareness as in case of P4, and uncertainty as in case of P7 to name a few. Another factor that was elicited was *Religion and Culture*. It was observed that few of the participants were also influenced by religious or cultural beliefs in their respective families and their societies (Kulis, Hodge, Ayers, Brown, & Marsiglia, 2012). A participant reported how her religious beliefs did not allow her conscious to even try substances, "Yes. Also, in my religion, it is not right to consume such substances. I am very religious, so I don't think it is right. I don't distance myself from people just because they consume substances, but I won't agree to what they are doing, and I will never consume it for this reason." (P4, personal communication, 2018). Another participant's narrative revealed that his culture did not accept people who consumed substances and hence he has never consumed a substance, "I think it was culture, because in our culture, they don't accept people who consume substances." (P6, personal communication, 2018).

Another factor was *Support Systems*. A participant stated how a good social support helped him stay away from substances, "*I never needed it. I always opened up to my close ones for everything. If I have stress, I call my brother, father, sister, etc, and tell them my problems and then they give me positive advises and help me cope up with the situation. If I consume alcohol, it will increase the things more. It causes dizziness, liver damage, etc.*" (P6, personal communication, 2018).

Another participant explained how her hobbies support her to get pleasure rather than using substances for the same. Her narrative was "So, there are many other things which can make you feel good. Why do you have to consume these substances for that high. It's basically not productive. I love craft work. So, when I see the end product, I feel really happy. The process was difficult, but the end product made it worth it. Also, it was productive. At the end of the day, I have something in front of me which I can use. Alcohol and marijuana aren't really productive. You're basically wasting your time getting high. After the high is over, you don't have anything to appreciate anymore. That's what I feel." (P4, personal communication, 2018).

Awareness was another factor that was elicited. Awareness in context of this organizing theme refers to the knowledge that an individual has with regard to substances. The participants showed awareness about the negative consequences of substance usage as well as how the portrayal through media can affect us. The participants were also aware of other consequences such as tolerance and dependency. One participant's narrative was "I think I've seen the worst cases as well. So, I've seen a lot of people going out of control when they were under the influence of either alcohol or some drugs. Even in the subject I study, I have been exposed to the biological predetermination and expositions of what happens pre and post of taking these drugs. So I think that's what has inhibited me my knowledge and my awareness about it and how I've seen people reacting differently and it has destroyed lives so that has impacted me a lot. This is the main reason why I don't use drugs." (P7, personal communication, 2018). Another participant said, "Substances are being glorified because these companies are paying heavily for the advertisements and they create a perception of these substances being really cool. And there is not nearly as much effort put in creating awareness for the harm it can do to you personally or socially, so I think that is one of the biggest reasons that in our society it is being portrayed as

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something glorious, to use any kind of substance. I am aware of the consequences as well as the marketing strategies used to influence people through a medium like media. This is what stops me from doing it.” (P2, personal communication, 2018).

Peer pressure and group conformity was another factor. Humans are social beings, no matter how scarce ones social relationships are, it would be fair to assume that most individuals are a part of some or the other peer group. One of the most influential group that an individual is a part of is an individual’s peer group (Ding, Newman, Buhs, & Shell, 2018). Individuals seek a membership in peer groups for a variety of reasons. The major ones being to have a sense of belonging, to have some form of social support or circle, or simply because of congruent interests and beliefs. However, in most cases, there are some slight differences that exist within the members of a peer group. Very often it’s seen that the majority within a peer group tends to exert some form influence on the individuals with those differences.

The trend observed after analysis of the responses was that all of the participants had encountered peer pressure to consume a substance at some point in time. A participant shared, “It has happened in the past when my friends have tried to convince me, but I never gave in.”(P1, personal communication, 2018). Other participants had too encountered similar instances at parties or when casually hanging out with friends.

CONCLUSION, IMPLICATIONS AND LIMITATIONS

Eight young adults were chosen for the study of understanding their attitudes regarding substance use on the criteria of never having used a substance. The results concluded that there was a high level of awareness amongst young adults about substance use. The participants had a negative attitude towards using the substances themselves but their attitude was neutral when others used substances. The main sources of the formation of their attitudes were media and personal experiences. The study concluded that awareness of the consequences, fear of getting addicted, presence of social and self-supporting systems, family trust as well as culture and religious factors were the main proponents that kept individuals away from using substances. The study also concluded that all participants faced peer pressure when it came to substance use.

The findings of the study can be used in the treatment of individuals who have difficulty controlling their usage. The findings will also help update the existing therapies for substance use and make them more relevant and effective. The findings can also be used generally, the factors that prevented the participants from using substances can be focused more upon in the education of children, this might help reduce their chances of using substances in the future. The sample size of the study could have been increased. This would reduce the level of generalize-ability in the study. A comparison could have also been conducted.

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Conflict of Interest

The authors carefully declare this paper to bear not a conflict of interests

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