

EFFECTIVE INTERVENTIONS FOR ADDRESSING SUBSTANCE ABUSE IN ADOLESCENTS: PERSPECTIVE OF PSYCHOLOGISTS AND SOCIAL WORKERS

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Abstract:

The issue of substance abuse among adolescents is a growing concern in contemporary society, posing serious risks to their physical, mental, and emotional well-being. Hence, it is imperative to establish effective interventions to combat this problem and provide essential support to young individuals grappling with substance abuse. The purpose of this research is to investigate the risk factors, difficulties, and contemporary therapies that social workers and psychologists are using to address adolescent substance misuse. and to ascertain whether radiologists have a role in detecting substance usage as well as the most efficient methods and approaches used by experts in this sector. According to recent studies, drug and alcohol misuse among teenagers in the nation is on the rise, with many young people turning to these substances. During adolescence, numerous detrimental behaviors tend to emerge, posing significant public health concerns. Substance abuse, in particular, exerts a profound influence on individuals, families, and societies, given its cumulative repercussions that lead to extensive social, physical, and psychological health issues. The initiation or perpetuation of substance abuse is often influenced by various factors such as socioeconomic status, parental upbringing, peer pressure, and inherent susceptibility to addiction. These factors collectively contribute to the complex and costly challenges associated with substance abuse.

Keywords: Adolescent health, Substance abuse, Drug abuse, psychologist role, social worker role.

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Introduction:

The issue of substance abuse among adolescents is a growing concern in contemporary society, posing serious risks to their physical, mental, and emotional well-being. Hence, it is imperative to establish effective interventions to combat this problem and provide essential support to young individuals grappling with substance abuse [1]. Professionals such as psychologists and social workers play a pivotal role in this endeavor, leveraging their specialized knowledge and skills to deliver comprehensive care and assistance to adolescents struggling with substance abuse. By adopting a holistic approach that takes into account each individual's unique circumstances, underlying issues, and support networks, psychologists and social workers can create tailored interventions that address the specific needs of each adolescent [2]. These experts possess the necessary expertise and resources to aid adolescents in developing coping mechanisms, fostering resilience, and instigating positive changes in their lives. Through their collaborative efforts, psychologists and social workers can significantly contribute to addressing substance abuse among adolescents and promoting sustained recovery and well-being. The escalating prevalence of substance abuse among adolescents in Saudi Arabia underscores the urgent need for action [3].

Recent research indicates a rising trend in substance abuse among adolescents in the country, with a considerable number of young people resorting to drug and alcohol consumption. A study conducted in 2006 among Saudi medical students reported an active smoking prevalence of 13%, with shisha being the most commonly used product (44.1%), followed by cigarettes (32.2%). Another study carried out among Saudi adolescents in 2010 revealed a tobacco smoking prevalence of 9.72% (12.43% among boys and 6.65% among girls) [4]. In contrast, the prevalence of substance abuse among male secondary school students in Saudi Arabia was found to be 8.8%, with a slightly higher rate of 9.3% among those who consumed alcohol. Among the illicit substances used by students, cannabis was the most commonly reported at 51.4%, followed by glue/solvents at 48.6% and amphetamine at 45.7%. A study in Saudi Arabia highlighted that students from higher-income families, with larger daily allowances, less study time, higher rates of skipping classes, lower religious observance, more time spent at home, and increased consumption of soft drinks were more inclined towards smoking and illicit substance use [5]. Additionally, having friends who smoke was identified as a significant predictor of smoking and substance abuse among youths. Another study indicated that 82.4% of students had adequate awareness about smoking and substance abuse, a factor significantly associated with parental education levels, family income, and parental cohabitation [6]. Various factors such as peer pressure, easy access to substances, and lack of awareness regarding the risks of substance abuse contribute to this concerning trend. repercussions of substance abuse on adolescents can be severe, leading to a spectrum of physical, mental, and social issues. Collaborative efforts among parents, educators, and policymakers are crucial to addressing this problem and providing necessary support and resources to guide young individuals towards healthier choices. implementation of prevention programs, early intervention strategies, and improved access to treatment services are vital in combatting adolescent substance abuse in Saudi Arabia. By enhancing awareness, promoting education, and fostering a supportive atmosphere, we can safeguard the well-being of our youth and cultivate a healthier society for the future [7].

Objectives:

The primary objectives of this review are:

- 1. To explore the current interventions being utilized by psychologists and social workers in addressing substance abuse among adolescents.
- 2. To identify the most effective strategies and techniques employed by professionals in this field.
- 3. To assess the challenges faced by psychologists and social workers in providing interventions for adolescent substance abuse.
- 4. To determine whether radiologists have a role in diagnosing substance abuse.
- 5. To investigate the risk factors for substance abuse among adolescents.
- To provide recommendations for improving interventions and support for adolescents struggling with substance abuse based on the insights gathered from psychologists and social workers.

Risk factors contributing to substance abuse among adolescents are multifaceted and can be categorized into various domains:

• Familial risk factors, such as childhood maltreatment, parental substance abuse. education parental level, parent-child relationships, socioeconomic status, parental approval of substance use, have been identified as significant influences adolescent substance abuse [8]. It is important

- to note that not all maltreatment is perpetrated by family members, as defined by the federal Child Abuse Prevention and Treatment Act (CAPTA) [9]. Studies have shown a clear link between childhood maltreatment, including physical abuse and neglect, and increased likelihood of adolescent substance use, with percentages ranging from 16% to 29% [8].
- Physical and sexual abuse. Physical child abuse is defined as any deliberate act causing physical harm to a child, while sexual abuse involves unwanted sexual contact or behavior. Research consistently demonstrates a strong association between physical or sexual abuse and adolescent use of substances like nicotine, marijuana, and alcohol [10]. Moreover, victims of physical or sexual assault are at a significantly higher risk of engaging in substance use, with the likelihood increasing two to four times [11]. Studies have shown varying results regarding the relative impact of different types of abuse, with some indicating a higher risk associated with sexual abuse and others with physical abuse.

Furthermore, posttraumatic stress disorder (PTSD) is linked to an increased risk of developing a substance use disorder, particularly involving marijuana and hard drugs like LSD, cocaine, heroin, inhalants, and nonmedical prescription drugs [12]. Individuals with PTSD may turn to substance use as a coping mechanism to deal with the intense stress resulting from trauma, thus heightening their vulnerability to substance abuse [13].

Emotional abuse: According to recent research findings, the impact of emotional abuse on adolescent substance use is noteworthy, although it appears to be less significant compared to the effects of physical or sexual abuse [14]. Moreover, studies indicate that exposure to violence can substantially elevate the likelihood of adolescents developing a substance use disorder involving alcohol, tobacco, marijuana, or other illicit drugs, with the risk increasing by two to three times. This heightened risk is attributed to the considerable stress induced by witnessing violence, particularly in cases where a child observes domestic violence [15]. Consequently, substance use may serve as a coping mechanism in such situations. Furthermore, there is a suggestion that in certain instances, substance use might precede exposure to violence, potentially occurring within a delinquent peer group where substance use is prevalent.

- Nevertheless, the existing body of literature on the association between emotional abuse, including exposure to violence, and adolescent substance use and abuse remains relatively limited [16].
- Social risk factors: Adolescent substance use is frequently influenced by peers, either through deviant peer relationships, where adolescents associate with a group of substance users, or through perceived popularity [17]. Studies have demonstrated a positive correlation between deviant peer relationships and adolescent substance use [18]. It is hypothesized that individuals with a propensity for substance use may be drawn to form peer groups with similar inclinations, or that individuals may be motivated to use substances in order to gain social status or be accepted into a group, thereby forming a deviant peer group [19].

The role of psychologist and social worker in managing adolescents' substance abuse:

Psychologists play a crucial role in addressing the problem of substance abuse by providing intervention, support assessment, and adolescents struggling with substance abuse. Additionally, psychologists work closely with other healthcare professionals, such as doctors and social workers, to provide a comprehensive treatment plan for adolescents in need. adolescents, treatment goals should be informed by a comprehensive assessment that includes the adolescent patient's developmental history and evaluation of psychiatric comorbidity [20]. As regard the role of psychologist and social worker, treatment for behavioral, psychosocial, and psychiatric problems should be integrated with substance abuse interventions as follow:

• Family-based interventions: Family-based interventions, such as structural-strategic family therapy, parent management training (PMT), therapy multisystemic (MST), multidimensional family therapy (MDFT, are rooted in family systems theory and operate under the belief that dysfunctional family dynamics play a role in adolescent substance use disorders (SUD) and associated issues. These interventions involve conducting a functional analysis to pinpoint problematic behaviors and relationship patterns, which are addressed through restructuring techniques. Parents are instructed in enhanced monitoring techniques and fundamental behavioral management principles to enhance their adolescent's conduct and diminish substance abuse, alongside strategies to enhance

- overall family functioning and maintain treatment progress [21].
- Behavioral therapy approaches: Behavioral therapy approaches are grounded in operant behavioral principles, which involve the reinforcement of behaviors or activities that are inconsistent with drug use, while also imposing consequences or sanctions when drug use or other undesirable behaviors occur [22]. This method establishes a system of positive reinforcement aimed at encouraging desired behaviors and extinguishing those associated with drug use. Regular urine monitoring is deemed essential for effectively linking consequences to the targeted behaviors. Research focusing on adolescents underscores the significance of not only delivering individual behavioral therapy but also involving the family in the treatment process. Studies have demonstrated that behavioral therapy can assist adolescents in achieving abstinence from drugs and enhancing various aspects of their lives, such as employment, school attendance, family dynamics, behavioral issues, and feelings of depression [23].
- Cognitive-behavioral therapy (CBT), which grounded in learning theory. demonstrated effectiveness in the treatment of adolescent substance abuse [24]. While individual CBT has garnered more empirical backing, early research suggests that group CBT could also play a role in diminishing adolescent substance use and enhancing overall behavioral outcomes. The therapeutic process involves the initial instruction and rehearsal of novel skills and coping mechanisms within therapy sessions, followed by their practical application in the patient's everyday life through designated "homework" tasks. Subsequent weekly sessions involve a review of the patient's achievements and challenges, reinforcing the assimilation of these new strategies [24].
- Motivational enhancement therapy (MET) has been utilized as a standalone, brief intervention as well as in conjunction with other therapeutic modalities such as Cognitive Behavioral Therapy (CBT). This client-centered approach aims to assist individuals in resolving any ambivalence they may have towards seeking treatment and to enhance their motivation to create a plan for change [25]. Research has demonstrated that MET can enhance treatment commitment and motivation, leading to reductions in substance abuse and risky behaviors. In the case of adolescents, who typically exhibit resistance to more directive

- interventions and may feel ambivalent about abstaining from substances, the use of MET techniques is especially crucial [26].
- Community reinforcement therapy: combines principles and techniques derived from behavioral, cognitive-behavioral, motivational, and family therapy, often using incentives to enhance treatment outcomes [27].

Consequences of substance abuse:

An individual who engages in substance abuse is at risk of experiencing a lower quality of life compared to a healthy non-abuser in various aspects, potentially leading to psychological, physical, social, educational, and functional impairments. Studies conducted in the United Kingdom have indicated that problematic Internet use is linked to a broad array of adverse social and psychological consequences, including but not limited to depression, bullying, alcohol and drug abuse [28]. Additionally, the severity of any health complications may double when individuals who substances consume abuse two or more psychoactive substances as opposed to just one. This group is also more likely to face increased risks of injury, lower educational attainment, violence, depressive symptoms, reckless driving, and suicidal ideation and attempts. Particularly in certain age brackets like adolescence and young adulthood, the concurrent abuse of multiple substances can result in significant and lasting repercussions that may impede their future prospects, given that this period is crucial as a adolescence to adulthood. transition from Substance abuse can have profound implications on the development of social relationships, identity formation, and educational progress for these individuals [29]. Furthermore, engaging in risky behaviors such as needle sharing can heighten the risk of HIV infection due to substance use, while exacerbating existing health issues related to HIV/AIDS [30].

Recommendations for improving interventions and support for adolescents with substance abuse:

In order to bolster interventions and assistance for adolescents dealing with substance abuse, it is crucial to take into account the suggestions put forth by psychologists and social workers with direct experience in aiding this susceptible demographic [31]. One pivotal suggestion is to give precedence to early detection and intervention by conducting routine screenings in educational institutions and other communal settings. Through the early identification of vulnerable adolescents,

professionals can offer timely aid and thwart the exacerbation of substance abuse issues. Moreover, it is vital to embrace a comprehensive approach that tackles the root causes contributing to substance abuse, such as trauma, mental health challenges, or familial dynamics [32]. This might entail collaborating with other experts, like therapists and family counselors, to deliver all-encompassing care. Additionally, establishing a nurturing and non-judgmental atmosphere is crucial in cultivating trust with adolescents and motivating them to seek assistance. This objective can be accomplished through peer support groups, counseling services, and educational initiatives that advocate for constructive coping mechanisms and resiliencebuilding [33]. In conclusion, by incorporating these recommendations, we can significantly enhance the efficacy of interventions and support for adolescents grappling with substance abuse.

Conclusion:

In summary, the most effective way to address substance abuse in adolescents is through a collaborative effort between psychologists and social workers. By leveraging the unique perspectives and expertise of both professionals, a comprehensive and holistic treatment plan can be developed. This plan may include a combination of psychological interventions like cognitivebehavioral therapy and social work strategies such as family therapy and community support programs. By working together, psychologists and social workers can identify and address the root causes of substance abuse in adolescents, providing tailored interventions that meet the individual needs of each young person. Through this multidisciplinary approach, we can achieve better outcomes and empower adolescents to develop the skills and resources necessary to lead healthy, substance-free lives.

References:

- Tobacco use among middle and high school students - United States, 2011-2015. Singh T, Arrazola RA, Corey CG, Husten CG, Neff LJ, Homa DM, King BA. MMWR Morb Mortal Wkly Rep. 2016;65:361–367. [PubMed] [Google Scholar]
- 2. Tobacco use among middle and high school students United States, 2011-2016. Jamal A, Gentzke A, Hu SS, Cullen KA, Apelberg BJ, Homa DM, King BA. MMWR Morb Mortal Wkly Rep. 2017;66:597–603. [PMC free article] [PubMed] [Google Scholar]
- 3. Prevalence of tobacco use among students aged 13-15 years in Health Ministers' Council/Gulf

- Cooperation Council Member States, 2001-2004. Moh'd Al-Mulla A, Abdou Helmy S, Al-Lawati J, et al. J Sch Health. 2008;78:337–343. [PubMed] [Google Scholar]
- 4. The prevalence and determinants of tobacco use among adolescents in Saudi Arabia. Al Agili DE, Park HK. J Sch Health. 2012;82:131–138. [PubMed] [Google Scholar]
- 5. Substance abuse among male secondary school students in Abha City, Saudi Arabia: Prevalence and associated factors. Al-Musa HM, Al-Montashri SD. https://www.alliedacademies.org/abstract/subst ance-abuse-among-male-secondary-school-students-in-abha-city-saudi-arabia-prevalence-and-associated-factors-6003.html Biomed Res. 2016;27:1364–1373. [Google Scholar]
- 6. Sociodemographic factors associated with tobacco smoking among intermediate and secondary school students in Jazan Region of Saudi Arabia. Gaffar AM, Alsanosy RM, Mahfouz MS. Subst Abus. 2013;34:381–388. [PMC free article] [PubMed] [Google Scholar]
- 7. Awareness of substance use and its associated factors in young Saudi students. Siddiqui AF, Salim AM. JMAS. 2016;6:61. [Google Scholar]
- 8. Child Welfare Information Gateway:
 Definitions of Child Abuse and Neglect
 [Internet]. US Department of Health & Human
 Services. 2011.
 http://www.childwelfare.gov/pubs/factsheets/w
 hatiscan.pdf.
- 9. Wall AE, Kohl PL. Substance use in maltreated youth: findings from the national survey of child and adolescent well-being. Child Maltreatment. 2007;12(1):20–30. [PubMed] [Google Scholar]
- 10. Singh VS, Thornton T, Tonmyr L. Determinants of substance abuse in a population of children and adolescents involved with the child welfare system. International Journal of Mental Health and Addiction. 2011;9(4):382–397. [Google Scholar]
- 11.Colorado Department of Public Health and Environment (US) [CDPHE] Child Abuse and Neglect: Section 3
- 12.Tonmyr L, Thornton T, Draca J, Wekerle C. A review of childhood maltreatment and adolescent substance use relationship. Current Psychiatry Reviews. 2010;6(3):223–234. [Google Scholar]
- 13. Kilpatrick DG, Acierno R, Saunders B, Resnick HS, Best CL, Schnurr PP. Risk factors for adolescent substance abuse and dependence: data from a national sample. Journal of Consulting and Clinical Psychology. 2000;68(1):19–30. [PubMed] [Google Scholar]

- 14.Moran PB, Vuchinich S, Hall NK. Associations between types of maltreatment and substance use during adolescence. Child Abuse and Neglect. 2004;28(5):565–574. [PubMed] [Google Scholar]
- 15.Simantov E, Schoen C, Klein JD. Health-compromising behaviors: why do adolescents smoke or drink? Identifying underlying risk and protective factors. Archives of Pediatrics and Adolescent Medicine. 2000;154(10):1025–1033. [PubMed] [Google Scholar]
- 16.Hamburger ME, Leeb RT, Swahn MH. Childhood maltreatment and early alcohol use among high-risk adolescents. Journal of Studies on Alcohol and Drugs. 2008;69(2):291–295. [PubMed] [Google Scholar]
- 17.Dodge KA, Malone PS, Lansford JE, Shari M, Pettit GS, Bates JE. A dynamic CASCADE model of the development of substance-use onset. Monographs of the Society for Research in Child Development. 2009;74(3):1–119. [PMC free article] [PubMed] [Google Scholar]
- 18.Simons-Morton B, Haynie DL, Crump AD, Eitel P, Saylor KE. Peer and parent influences on smoking and drinking among early adolescents. Health Education and Behavior. 2001;28(1):95–107. [PubMed] [Google Scholar]
- 19. Musher-Eizenman DR, Holub SC, Arnett M. Attitude and peer influences on adolescent substance use: the moderating effect of age, sex, and substance. Journal of Drug Education. 2003;33(1):1–23. [PubMed] [Google Scholar]
- 20.Bhave, S. Y., Sovani, A. V., & Shah, S. R. (2022). Role of Psychologist in Adolescent Medicine: An International Perspective. Pediatric clinics of North America, 69(5), 847–864. https://doi.org/10.1016/j.pcl.2022.05.001
- 21.Deas D, et al. Adolescents are not adults: Developmental considerations in alcohol users. Alcoholism, Clinical and Experimental Research. 2000;24(2):232–237. [PubMed] [Google Scholar] [Ref list]
- 22.Drug Strategies. Treating Teens: A Guide to Adolescent Drug Programs. Washington, DC: Drug Strategies; 2002. [Google Scholar] [Ref list]
- 23.Monti PM, et al. Motivational Enhancement for Alcohol-Involved Adolescents. In: Monti PM, Colby SM, editors. Adolescents, Alcohol, and Substance Abuse: Reaching Teens Through Brief Interventions. New York: Guilford Press; 2001. pp. 145–182. [Google Scholar] [Ref list]
- 24. Wise BK, Cuffe SP, Fischer T. Dual diagnosis and successful participation of adolescents in substance abuse treatment. Journal of Substance

- Abuse Treatment. 2001;21(3):161–165. [PubMed] [Google Scholar] [Ref list]
- 25.Lohman M, et al. Perceived Motivations for Treatment in Depressed, Substance-Dependent Adolescents With Conduct Disorder. College on Problems of Drug Dependence: 64th Annual Scientific Meeting; Rockville, MD: National Institute on Drug Abuse; 2002. [Google Scholar] [Ref list]
- 26.Riggs PD, Mikulich SK, Hall S. Effects of Pemoline on ADHD, Antisocial Behaviors, and Substance Use in Adolescents With Conduct Disorder and Substance Use Disorder. College on Problems of Drug Dependence: 63rd Annual Scientific Meeting; Rockville, MD: National Institute on Drug Abuse; 2001. [Google Scholar] [Ref list]
- 27.Teplin LA, et al. Psychiatric disorders in youth in juvenile detention. Archives of General Psychiatry. 2002;59(12):1133–1143. [PMC free article] [PubMed] [Google Scholar] [Ref list]
- 28.Familial, social, and individual factors contributing to risk for adolescent substance use. Whitesell M, Bachand A, Peel J, Brown M. J Addict. 2013;2013:579310. [PMC free article] [PubMed] [Google Scholar]
- 29. The mediating role of bullying and victimisation on the relationship between problematic internet use and substance abuse among adolescents in the UK: the parent-child relationship as a moderator. Samara M, Massarwi AA, El-Asam A, Hammuda S, Smith PK, Morsi H. Front Psychiatry. 2021;12:493385. [PMC free article] [PubMed] [Google Scholar]
- 30.Polysubstance use in early adulthood: patterns and developmental precursors in an urban cohort. Steinhoff A, Bechtiger L, Ribeaud D, Eisner MP, Quednow BB, Shanahan L. Front Behav Neurosci. 2021;15:797473. [PMC free article] [PubMed] [Google Scholar]
- 31. Schinke S, Brounstein P, Gardner S. Science-Based Prevention Programs and Principles. Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration; Rockville, MD: 2002. 2002. DHHS Pub. No. (SMA) 03-3764. [Google Scholar] [Ref list]
- 32.Substance Abuse and Mental Health Services Administration (SAMHSA) National Registry of Evidence-based Programs and Practices (NREPP web site) www.nrepp.samhsa.gov. [Ref list]
- 33.Botvin GJ. Preventing drug abuse in schools: Social and competence enhancement approaches targeting individual-level

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etiological factors. Addict Behav. 2000;25:887–897. [PubMed] [Google Scholar] [Ref list]