

Adolescent substance abuse treatment approaches paper research paper examples

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Adolescent substance abuse refers to dependence on or overindulgence in addictive substances (e. g., drugs or alcohol) by young individuals. There are many reasons why adolescents resort to the misuse and abuse of substances. Some authors and experts in the field consider the theoretical perspectives on the interrelationships between substance abuse and emotion while some laypersons view addiction as evil in itself and that the addict is a bad person . There are those of the opinion that drug abuse is caused by unfavorable familial and cultural influences whereas in the medical and health sectors, addiction is a disease caused by neurochemical imbalance. As such, the question is thus: What treatment approach seems best suited for adolescent substance abuse treatment and why?

There are many treatment approaches to adolescent substance abuse, but there is no one best approach. The underlying reason is that there is a big difference in conceptual understanding of substance abuse, large distinction between techniques employed, “ specific types, modalities or settings of treatment,” among other things . Nonetheless, there are those that are considered as best performing treatment approaches for adolescent according to medical organizations and other professional communities. Examples of these include Motivational Enhancing Therapy (MET), Adolescent Community Reinforcement Approach (ACRA), Contingency Management (CM), Assertive Community Treatment (ACT), Cognitive-Reinforcement Approach (CRA), Cognitive-Behavioral Treatment (CBT), to name a few. Despite the inexhaustive list, some of the adolescent substance intervention approaches are an admixture of the various human domains, secular / non-secular alternative models, theories, and practices.

For me, the best young people's treatment approach for/against substance abuse/addiction is the motivational enhancing therapy (also known as motivational interviewing) because, as a "communication style," it resolves adolescents' ambivalence regarding stoppage of their drug misuse/addiction by engaging in treatment and strengthening motivation to change. Because MET is user-friendly and client-centered, it touches upon adolescent's awareness and commitment where reliance and emphasis on non-judgmental and non-confrontational clinical/therapeutic skills are employed. It evokes directive and rapid yet internally motivational change, which guides adolescents in stepwise manner until the recuperative stage. There is a preliminary assessment and individual treatment sessions, which consist of initial therapeutic feedbacks, stimulating discussions, and self-motivational statements for the building up of change in behavior for sustained abstinence. Adolescents are also usually encouraged to bring with them their significant other.

Despite my choice for MET, its effectiveness as an adolescent substance treatment approach depends on the intervention's goal and type of drugs used (e. g., cocaine, heroin). The overall positive results for MET vary for adolescents who tend to have multiple use of drugs and mixed problems despite the use of open-ended questions, reflective listening, envisioning the future, rolling with resistance, and firming up plans. Nevertheless, adolescents who recognize its efficacy as a treatment approach see the benefit of change as outweighing the cost of change. MET is viewed as better than other treatment approaches such as "contingency management," "pharmacotherapies," and so on. Then again, depending on the level of

substance severity, the type of treatment approach for a particular substance abuser varies. Since emphasis is made concerning their feelings, behaviors, and feedback by means of interactions with other individuals and expert therapists, there is a greater likelihood to get direct and concrete outcomes at a fair amount of time using MET.

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