Adolescent substance use screening instruments health and social care essay

Food & Diet



Topic: Adolescent Substance Use Screening Instruments

Introduction

In the recent years there has been a growing recognition that many people especially the adolescents with drug or alcohol problems are also experiencing a range of other psychological and psychiatric problems. The occurrence of the concurrent psychological and psychiatric problems is likely to have an impact on the success of treatment services. These problems vary greatly from undetected major psychiatric illnesses that meet internationally accepted diagnostic criteria. Similarly, the presence of a substance misuse problem amongst those suffering from a major psychiatric illness often goes undetected. The use of illicit drugs such as cannabis and amphetamine is higher amongst those individuals suffering from schizophrenia (Hall, 2002) and the misuse of alcohol in people suffering from schizophrenia (Gorelick et al., 1999; Soyka et al., 1998). High rate of alcohol misuse have also been reported in a number of groups including women and the adolescent ladies and boys presenting for treatment with a primary eating disorder, individuals suffering from post traumatic disorders, and from anxiety and depression. Despite considerable evidence of high levels of comorbidity, drug and alcohol treatment agencies and mainstream psychiatric services often fail to identify and respond to concurrent psychiatric or drug and alcohol problems, respectively. Alcohol is by far the drug of choice among the youth. It is often the first one tried, and it is used by most teenagers and adolescent (Johnston, 2010). Dangerous overindulge drinking is common and increases with age as well. Adolescent drinking too often results in several risks which include: unintentional injuries and death;

suicidality; aggression and victimization; infections and pregnancies from unplanned, unprotected sex; and academic and social problems (Brown et al., 2008). Drinking in adolescence is often associated with increased risk for alcohol dependence later in life (Hingson et al., 2006; Grant & Dawson, 1997). In addition, heavy drinking in adolescence may result in long-lasting functional and structural changes in the brain (Squeglia et al., 2009)Increasingly, the importance of detecting harmful and hazardous drinking in all health care settings has been recognised. Screening instruments need to be short, easily understood by the client, easily scored by the clinician and provide sufficiently reliable information to enable the clinician to decide whether further assessment and intervention is required. Ideally, screening for alcohol and drug problems should be incorporated into routine practise and particularly, in order of probable impact, in medical practices, general hospitals, the workplace, welfare and general counselling services (Jarvis and Mattick, 1993). Determining the quantity and frequency of alcohol use is an essential part of an assessment when harmful or hazardous use of alcohol is suspected. However, it may be time consuming. Determining the severity of alcohol dependence is important to assist in the development of an appropriate treatment response. The use of biochemical measures as either screening or diagnostic measures have been the focus of considerable attention in the alcohol field. However, the biochemical measures are relatively limited value in detecting an alcohol or drug use disorder.

Research Objectives

To identify which screening /diagnostic instruments are relevant to detect alcohol and other drug problems in adolescentsTo review the screening/ diagnostic instrumentsTo recommend when these instruments should be used, by whom and how they should be interpretedTo identify limitations and provide recommendations for further research

Aims and limitations of the study

It is hoped that the study and the review of the screening and diagnostic instruments and procedures in the study serves as a practical resource for clinicians serving the adolescents in the mental health settings, hospitals, and general practice. The study is not intended to be a comprehensive review of all screening and diagnostic instruments nor does it provide an exhaustive review of the research findings pertaining to particular instruments. Due to the nature and scope of this study, the researcher has been selective and those instruments reviewed are widely used, had been demonstrated to be reliable and valid measures of the construct in question and were brief and easy to administer.

Statement of the Problem

In this era of widespread alcohol and drug use among teenagers and of limited treatment resources, there is an obvious need to make sound treatment decisions. Standardized evaluation and review instruments and demonstrated reliability and validity are the best means available for making decisions about who to treat, how to secure their cooperation, what life problems to address and how behavioural indicators to use to measure change.

Purpose of the Study

The purpose of the study is to identify and evaluate the standardized assessment and screening tools for adolescent drug and alcohol use. The study findings are purposed to allow providers in various settings to choose which of the standardized assessment tools/ instruments is best for their purpose. The " best" must be judged along several dimensions which include: ease of administration and scoring, cost, what exactly it is designed to measure, as well as whether it is psychometrically sound (that is, actually measures what it purports to measure).

Research Questions

Which screening /diagnostic instruments are relevant to detect alcohol and other drug problems in adolescents? How effective are the screening/ diagnostic instruments in detecting substance use and problems in adolescents? When should the instruments be administered, by whom and how should they be interpreted? What limitations exist in research that would require for further research

Conceptual Hypotheses

There exists positive correlation between substance use and mental disorders. Drug use provides the youths with coping mechanisms serving to alleviate symptoms of depression, anxiety, and stress. Substance use is also associated with personality characteristics that are also common in behavioural disorders such as sensation-seeking, risk taking, and impulsivity. https://assignbuster.com/adolescent-substance-use-screening-instrumentshealth-and-social-care-essay/ Youths with mental health disorders that abuse substances are likely to experience many negative outcomes, including higher rate of hospitalization, incarceration, and treatment failure (Randall, 1999)Various substance screening instruments exist and the clinicians are at times confused due to lack of effective instrument assessment and evaluation. Monitoring and evaluation is critical and the evaluation report should be considered first before choosing the best screening instrument to use. There are research loops in the adolescent substance screening instruments

CHAPTER 2: LITERATURE REVIEW CHAPTER 3: RESEARCH METHODOLOGY RESEARCH DESIGN AND APPROACH

The descriptive survey design was adopted for the study. This is because this study sought to find out the relevant and effective screening/ diagnostic instruments to detect substance use and problems among the adolescents. A descriptive survey was selected because it provides an accurate representation or explanation of the various elements and characteristics. These characteristics would include such examples as behaviour, opinions, knowledge, abilities, and beliefs of a particular situation, individual, or group. According to Mouton (1996), a survey is used to collect original data for describing a population that is too large to observe directly. A survey helps to obtain information from a population sample bymeans of self-report. Survey design allows the respondents and the sample population to respond to a series of structured and well-designed questions posed by the researcher (Polit&Hungler 1993). Both quantitative and qualitative

approaches were adopted. According to Burns and Grove (1993), https://assignbuster.com/adolescent-substance-use-screening-instrumentshealth-and-social-care-essay/ quantitative research is asystematic, formal, and objective process used to test and describe relationships. Quantitative approach is used to determineeffect and cause interactions among different variables. Qualitative research design on the other hand is a subjective and systematic approach useful in describing life experiences and giving them meaning. Qualitative approach is vital in in-depth exploration that helps to gain insight, complexity and richness in the inherent phenomenon.

DATA COLLECTION

Sampling Method

A major determinant of an appropriate sample size is the variability of the population characteristic under investigation. The larger the variability, the larger they require sample size. Another factor affecting the required sample size is the degree of precision desired in estimating a population characteristic. The higher the precision required, the larger the appropriate sample size. Finally, the required sample size is affected by the degree of confidence the researcher or research user demands in estimates. The higher the desired confidence levels in the estimates, the larger the sample size. Based on the research objectives and the issues to be investigated, it would have been most appropriate if all traders and customersengaged in ecommerce participated. However, due to the time constraints and resource limitations inherent in this study, a non-probability sample of the population was selected. Saunders et al (2007) asserts that a non-probability sample is most often used when adopting a case study strategy. According to Oppenheim (2000), a non-probability sample refers to a sample in which the probability of each case being selected from the total population is not https://assignbuster.com/adolescent-substance-use-screening-instrumentshealth-and-social-care-essay/

known. The respondents were randomly chosen. The sample population for this study was sampled randomly to a total of 100 which included both gender (male and female).

Primary Data Collection

In collecting data that could be analysed using quantitative means, Easterby-Smith et al (2008) claims that researchers could collect either primary or secondary data. He further claims that though each of these means have their merits and demerits, the collection of one's own data gives control over the structure of the sample and the data obtained from each respondent. It also gives greater confidence that the data collected would match the research objectives.

Data Collection Instrument

Survey Questionnaires were adopted as the data collection instruments. A questionnaire is a printed self-report form designed to elicit information that can be obtained through the written responses of the subjects.

Theinformation obtained through a questionnaire is similar to that obtained by an interview, but the questionstend to have less depth (Burns & Grove, 1993). Data were collected with the aid of questionnaires to evaluate the sample population's knowledge and views on research objectives. Survey Questionnaires are easy to administer, enhances anonymity, have high response rate, and have less biasness. To limit the weaknesses of questionnaires and ensure validity and accuracy, both open-ended and closed-ended questions were adopted. Theopen-ended questions ensured that the subjects responded in writing thus providing more details, whereas the easy to administer and analyse closed-ended questions had options which weredetermined by the researcher (Burns & Grove, 1993).

RESEARCH STRATEGY

This study adopted a case study strategy in answering the research question. Robson (2002) asserts that the case study strategy would be useful if the aim of the study is to gain a rich understanding of the research perspective and the process being endorsed. Therefore as this study aims to understand the risks of disclosing personal information over e-commerce business, a case study would be most effective.

RELIABILITY AND VALIDITY

Reliability

Polit and Hungler (1993) refer to reliability as the degree of consistency with which an instrument measures the attribute it is designed to measure. The data collection techniques administered to the sample population was used to revealconsistency in responses. Reliability was ensured by minimizing sources of measurement error like data collector bias. Data collector bias was minimized by the researcher's being the only one who administered the data collection techniques, and standardizing conditions such as exhibiting similar personal attributes to all respondents, for example friendliness and support. Conditions were considered tomaintain privacy and prevent interruptions. Subjects were requested not to write their names on the data collection instruments to ensure confidentiality.

Validity

The validity of an instrument is the degree to which an instrument measures what it is intended to measure (Polit&Hungler, 1993). Content validity refers to the extent to which an instrument represents the factors under study. To achieve content validity, the instruments used included a variety of questions on theknowledge of correspondents about the research topic, objectives and questions. Content validity was further ensured by consistency in administering the instruments of data collection. The subjects were requested to complete the questionnaires and respond to the questions in the presence of the researcher. This was done to prevent subjects from giving guestionnaires to other people to complete on their behalf. External validity was ensured. Burns and Grove (1993) refer to external validity as the extent to whichstudy findings can be generalized beyond the sample used. All the persons approached to participate in thestudycompleted the questionnaires. No single person who was approached refused to participate. Generalizing the findings to all members of the population was therefore justified. Seeking subjects who are willing to participate in a study can be difficult, particularly if the study requires extensive amounts of time or other types of investment by subjects. If the number of the personsapproached to participate in a study declines, generalising the findings to all members of a population is not easy to justify. The study was well planned to limit the investment demands on subjects in order to increase participation. As the percentage of those who decline to take part in the study increases, external validity decreases (Burns & Grove 1993: 270).

ETHICAL CONSIDERATIONS

Integrity, honesty, expertise and diligence are key ingredients in conducting of research. This is useful to protect and recognise the ethics and human rights of the respondents. The key ethical consideration observed in this study included anonymity, informed consent, confidentiality and rights to self-determination. Written permission and respondent's consent were obtained prior before the respondents responded to the research instruments. Burns and Grove (1993) define informed consent as the prospective respondent's agreement to participate voluntarily in a study, whichis reached after assimilation of essential information about the study. The subjects were informed of their rights to voluntarily consent or decline to participate, and to withdraw participation at any time withoutpenalty. Subjects were informed about the purpose of the study; the procedures used to collect thedata, and assured that there were no potential risks or costs involved. Anonymity and confidentiality were observed and maintained throughout the study. Burns and Grove (1993) define anonymity as when subjects cannot be linked, even by the researcher, with his or her individual responses. In this study anonymity was ensured by not disclosing the respondent's name on the data collection instruments, research reports and detaching the written consent from the guestionnaire. In this study, confidentiality was maintained by keeping the collected data confidential and not revealing the subjects' identities when reporting the study (Burns & Grove 1993). No identifying information was entered onto the data collection instruments, and the instrumentswere only numbered after data had been collected (Polit&Hungler1995: 139). The ethical principle of selfdetermination was maintained. Subjects were treated as autonomousagents by informing them about the study and allowing them to voluntarily choose to participate or not. Scientific honesty is regarded as a very important ethical responsibility when conducting research. Dishonest conduct includes manipulation of design and methods, and retention or manipulation of data (Brink 1996). The researcher tried to avoid any form of dishonesty by recording truthfully the answers given during interviews.

ANALYSIS OF RESEARCH FINDINGS

For the purpose of the proposed Survey, the researcheranalysed the data so as to obtain percentages, mean scores, and other descriptive statistics which assisted in satisfying the purpose of the study. Bar charts, graphs, and piecharts were all used to diagrammatically depict the results in a more readerfriendly manner.

QUESTIONNARE

My name is Paul Peters I'm doing research in adolescence substance screening instruments. In order to recognize users' practices with respect to use and effectiveness of the substance screening instruments, they were asked the following questions via the questionnaire: Thank you for participating in this survey. The information will be kept confidential.