

Prevention of Drug Abuse Among Iranian Adolescents Through Downward Social Comparisons

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Published online November 7, 2004

Former addicts and their families can be used in studies investigating preventive education regarding drug use and addiction for adolescents. The theoretical basis of this approach is that, as in an Iranian proverb on morality, social comparisons could be a major instrument for changing the attitudes of people towards drug abuse. In the present study, a group of high-school students attended seven educational sessions of a preventive drug-abuse program. The students were exposed to former drug abusers and their families. The former drug addicts and their families informed the participants about the consequences of addiction in their lives, how they became addicted, and how the addiction diminished their psychosocial lives. The family members of addicts explained to the participants how drug addiction of a family member had adversely affected their functioning. Each session lasted about 70 minutes; students were allowed to ask former drug addicts and their families questions about drug addiction at the conclusion of each session. A comparison of students' pre- and post-workshop views towards drug addiction revealed significant changes: Students became more prevention-oriented (i.e., displaying negative attitudes towards drug habits) following the sessions than they were initially. These results were interpreted in view of the theory of downward social comparisons (Lockwood, 2000), and an Iranian proverb that states, "If you want to learn morality, you should observe the effects of immorality on people who do not behave morally."

Keywords: Drug abuse; Downward comparison; Social comparison; Prevention; Iran.

Introduction

Many psychologists believe that there are three sources of self-knowledge among adolescents: self-observation, social feedback, and social comparison (Schoneman, College, Taber, & Nash, 1984; Younesi, 2003). The social comparison could be either an upward or a downward comparison (i.e., to compare

ourselves with people who are better or worse than us, respectively; Cash, 1990; Thompson, Henberg, Altabe, & Tantleff-Dunn, 1999). Observing the negative consequences of drug abuse, which is evident in the poor psychosocial functioning of addicts, is an example of a downward social comparison. Teenagers who abuse drugs experience many adverse circumstances in life, including overdoses and accidents; teenage pregnancy; divorce; theft and violence; poor educational attainment; low-skilled employment with low job stability; development of disorganized thinking; impaired problem-solving skills and emotional functioning; weak coping strategies; greater social isolation; and depression (Sussman, 1996).

Research shows that most adolescents who use drugs do not abuse them later on in life (Newcomb & Bentler, 1988, 1989). Prevention programs should be

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focused on youths who are at high risk for drug abuse. Such programs would provide a maximal social payoff (Pentz, 1994). Some psychologists believe that one of the most important tasks of prevention programs for drug abuse is to provide information about the course of negative consequences of drug abuse, as well as information regarding the familial and social context associated with drug abuse (Botvin, Epstein, Baker, Diaz, & Williams, 1997; Botvin, Griffin, & Williams, 2001; Winters, Stinchfield, & Henly, 1993).

Prevention program should provide an empathic and cognitive understanding of the negative consequences of drug abuse, promote the active review of information acquired throughout the program, and teach adolescents about the psychosocial consequences of drug abuse. Through such programs, adolescents learn that abuse occurs when one uses drugs to cope with problems, since such use gives rise to negative consequences. Adolescents would also be discouraged from supporting drug abusers (Kiney & Leaton, 1982; Sussman, 1996). It is essential to use social comparisons in preventive programs for drug abuse, since social comparisons provide an active source of self-knowledge for youths (Wood, 1989).

Compared to other sources of self-knowledge, social comparisons play a prominent role in self-evaluations and self-regulation among Iranian students (Younesi, 2003). As an example of a downward social comparison in drug-prevention programs, adolescents could be persuaded to consider the miserable condition of the drug abuser and the state of his or her family (Lockwood, 2000). Downward comparisons can encourage people to avoid certain behaviors and situations that may have negative consequences for them (Lockwood, 2000). There is an Iranian proverb that exemplifies the nature of downward comparisons: "If you would like to learn morality, you should learn it from people who do not behave morally."

The downward social comparison can be performed with ex-drug addicts and their family members, who may educate the adolescents (i.e., in vivo confrontation). In this peer-group learning exercise, the adolescents can learn about the negative consequences of drug abuse in a live confrontation with individuals who have been affected by the problem. Research indicates that this type of in vivo exposure can be more effective than any in vitro methods in changing adolescents' views (Walker et al., 1981). This essentially primary preventive approach has the potential to help adolescents adopt attitudes that will deter them from using or abusing drugs. This program can be carried out with adolescents in their highschool classrooms.

Objectives of the Present Study

The present study has four objectives: (a) to change the views of adolescents toward drug addictions, so that they adopt preventive views with regard to drug habits; (b) to reduce the social and psychological value of drug abuse among youths; (c) to socially "immunize" adolescents against being tempted to use or abuse drugs; and (d) to reduce adolescents' yearning for drugs of abuse. By the end of the study, we aim to reduce the demand and curiosity for illicit substances among adolescents, who are at the highest risk for addiction compared to other demographic groups. Adolescents will have gained knowledge and experience regarding the negative consequences of drug abuse and the stresses that drug abusers' families face. Furthermore, adolescents' attitudes towards drug abuse will become preventive by the current study's conclusion.

Discussion

Study Design

In vivo confrontation by ex-drug addicts and their families will be used to inculcate ideas regarding the negative consequences of drug addiction in adolescents (ages 15 to 16 years). In Two groups are included in this study: an experimental group, exposed to the in vivo confrontation, and a control group. The ex-drug addicts used for downward comparisons in this study had abstained from their drug habits for at least six months prior to the study's commencement.

Approximately 1000 adolescents, both male and female, who were attending high school (in all regions of Tehran), constituted the study's experimental group. These adolescents were drawn from all grade ten classrooms in the highschools studied. Ex-drug addicts and their families visited the schools weekly, introduced themselves, and had a 70-min discussion session with students. The drug abusers and their family members spoke in detail about their experiences with drug addiction, and the negative consequences of addiction in their lives. The adolescents were allowed to ask the drug abusers and their families questions during the session. Each session included about 30 students. Before beginning the sessions, a psychologist explained to the drug abuser and the family the objectives of the study; a psychologist led all sessions.

Students attended seven sessions: four sessions with drug abusers, and three sessions with the families of drug abusers. Students who were involved in the experimental group completed a standardized questionnaire regarding the views of adolescents toward drug addiction (Younesi & Mohammadi, 2001), both before and after the final session (these constituted the pre- and post-test measures). The questionnaire consisted of 84 items that assessed participants' views on drug

addiction in different situations. The instrument was originally developed by Bahrami (2000), and has reasonable validity and reliability (Younesi & Mohammadi, 2001). The test-retest reliability (one-week interval) of this measure is reasonable ($r = .846$; $p < .01$; $N = 275$). The internal reliability of the questionnaire was also found to be significant and reasonable ($\alpha = .923$; $N = 1675$; $p < .01$). According to the results of a factor analysis conducted using 1675 adolescents, the instrument has ten factors or dimensions: (a) general views about addictions; (b) views about using the drug; (c) views about the reasons for drug abuse; (d) views about acceptances of drug abusers; (e) views about the personality of drug abusers; (f) society's views about addictions; (g) views about giving up addictions; (h) views about the consequences of drug abuse; (i) views about avoiding addiction; and (j) views about solving the problem of addictions.

In the control group, students (both males and females, aged 15 to 16 years) only completed the questionnaire twice, separated by a two-month interval, without attending the sessions with drug abusers and their families. This control group of approximately 680 subjects were selected randomly from grade ten classrooms of highschools throughout Tehran.

All the sessions and programs were carried out at the respective highschools. We predicted that students in the experimental group will have views toward addiction that are significantly more prevention-oriented than those of the control group.

Results

A total of 1675 individuals participated in the study, 1007 in the experimental group (46.1% males, 53.9% females), and 668 in the control group (45.8% males, 54.2% females). ANOVAs were used to evaluate our primary prediction. Table 1 displays observed means and standard deviations for pre- and post-test total scores for both groups. We obtained a significant main effect for both Group, $F(1,1672) = 164.51$, $p < .001$, and Gender, $F(1,1672) = 37.23$, $p < .001$, but these were qualified by a significant Group \times Gender interaction, $F(1,1672) = 17.79$, $p < .001$.

Discussion

As shown in Table 1, there is a significant difference between the two groups (experimental and control) in terms of their views toward addiction ($p = .00$). Hence, at the end of the program, the experimental group expressed more preventive (i.e., negative) views about drug abuse than the control group. Thus, the confrontation with drug abusers and their families that the experimental group experienced had a positive impact on these adolescents. These results are support the theories of preventive educational programs that

Table 1
Observed means and standard deviations for the pre- and post-test total scores for both groups.

| Gender | Groups | Means | SD |
|------------------------|--------------|--------|-------|
| Female | Experimental | -18.01 | 41.27 |
| | Control | 0.09 | 36.46 |
| | Total | -10.70 | 40.38 |
| Males | Experimental | -39.70 | 52.13 |
| | Control | -3.87 | 30.50 |
| | Total | -25.46 | 48.10 |
| Both males and females | Experimental | -28.01 | 47.81 |
| | Control | -1.73 | 33.90 |
| | Total | -17.53 | 44.69 |

were suggested by Winters, Stinchfield, and Henly (1993) and Botvin et al. (1997; 2001). It seems that changing the views of students toward addiction through downward comparisons can be a useful approach in encouraging prevention behaviours (Lockwood, 2000). Clinical observations in Iran indicate that social comparison is a major source of self-knowledge among adolescents for regulating their social adaptation (Younesi, 2003). Students' exposure to ex-drug abusers may provide good reasons for avoiding drugs (Emmons et al., 1995); this process, in addition to other factors, such as family and social support, social and life skills, and other cognitive-behavioral elements, can form an effective preventive education program in reducing adolescents' yearning for drugs.

The results showed significant gender differences in terms of views toward addiction ($p < .01$) in the experimental group. Specifically, the program had a more positive impact on adolescent males than on females. This is probably because boys in Iran have more experiences and information about addiction, so that changes among them will be more marked. Nevertheless, there is a definite need for further research in this area to determine whether other factors could be at play. In addition, it is necessary to investigate alternative methods of confrontation, such as videos and films, that may be less difficult to implement. A follow-up study of the current study's sample is also necessary in order to determine how enduring the new attitudes toward drug abuse are.

Acknowledgements

This research was supported by a grant from the Iranian National Research Center for Medical Sciences. We would like to thank all staff of the Center for their support. The active cooperation of the Ministry of Education (in the province of Tehran, Iran) is also appreciated.

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