PREDICTORS OF READINESS TO CHANGE YOUNG ADULT DRUG USE IN COMMUNITY HEALTH SETTINGS

Ebon Alley, MSW  
Kirk von Sternberg, PhD  
Tiffany Ryan, MSW

The University of Texas at Austin School of Social Work

Purpose: In the U.S., an estimated 22.5 million Americans suffer from substance related disorders. Compounding these concerns, 18-25 year olds consume more drugs than any other age group. During adolescence and young adulthood, individuals experience a multitude of social and neurological changes including substantial development of the prefrontal cortex. Development of impulse control and affect regulation are believed to be important in coping with negative emotions and individual’s behavior including substance abuse. Compared to older adults, they often do not identify as abusing or being dependent on substances, and therefore may not utilize interventions. Screening and Brief Interventions (SBI) can provide a rare opportunity for young adults to receive care that they otherwise may not.

Methods: This study evaluated readiness to change drug use in young adults ages 18-25. Data was collected from 2000-08, in a Texas metropolitan hospital district. 1,560 non-treatment seeking young adults who screened at risk for drug problems were assessed. Readiness to change was measured by a Readiness Ruler. Latent variables included emotional distress, drug problem severity and criminal activity. Structural equation modeling tested relevant associations and paths. Due to the different paths being analyzed, two separate models were constructed.

Findings: When Model 1 was tested the overall fit was strongly supported, n= 1560, CFI = .992, RMSEA = .024, and a p= .000 ($\chi^2$ = 87.7, df= 47). Drug use fully mediated the relationship between Emotional Distress and Readiness to Change. Bi-variate analysis of the Emotional and Readiness indicated a significant positive correlation r= .232, p< .001, while the direct effect of Emotional Distress on Readiness in Model 1 measured b= -.180, p= .324. Gender was also found to be a significant predictor of Readiness with females associated with higher readiness to change their drug use than males (b= -.59, p= .02). The direct effect of severity of Drug Use on Readiness measured b= 13.00, p= <.001).

The overall fit for Model 2 was also strong demonstrating the same exact fit indices as Model 1, CFI of .992, a RMSEA of .024, and a p=.000 ($\chi^2$ = 87.7, df= 47). We measured whether Emotional Distress would mediate the relationship between stressful and Readiness to Change drug use.

In comparing the measurements between Model 1 and Model 2, there were multiple changes in significance levels occurring between the static exogenous variables and the latent variables Emotional Distress and Drug Use. Despite these differences the direct effect measurements between all exogenous variables and the endogenous variable Readiness remained identical.

Conclusions: The most compelling relationship uncovered by this study was the path connecting Emotional Distress, Drug Use and Readiness to Change. With standardized regressions of .56 and .49, it also contained the two strongest direct effects measured. This may infer that young adults receiving care in community health settings are utilizing substances in order to cope/self-medicate with emotional distress. Further, the more severe the distress and subsequent drug use, the higher the readiness for change.