



Self-Efficacy And Attitudes Towards Drug Consumption In Childhood: Exploring Concepts

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ABSTRACT

This paper aims to explore the concepts of self-efficacy and attitude towards consumption, approached by the theory of motivation and human behavior. This is a theoretical study based on literature. High levels of self-efficacy have beneficial consequences for the functioning of the individual. Concerning attitudes towards drugs, the presence or absence of preconceptions and positive values of drugs increases risk or consumer protection. Nurses should apply the concepts of self-efficacy and attitudes towards consumption to guide actions of health promotion and prevention of drug consumption in children and adolescents.

Descriptors: Efficacy; Attitude; Primary Prevention; Substance-Related Disorders, Drug consumption.

Introduction

The amount of drug use is a key determinant of the global drug problem's size. Around 200 million people are thought to use drugs worldwide. In Colombia, the consumption of psychoactive substances by young schoolchildren has increased, with increasingly earlier starting ages. (UNODC, 2014) The Colombian Drug Observatory (ODC) shows that there are more and more boys and girls who experience Psychoactive Substances (SPA); while the 1996 study showed an average start with alcohol of 15.9

years, the Rumbos study in 2001 showed a start at 12.9 years, although 15.2% started before 10 years (two). The highest prevalence's correspond to the consumption of legal drugs,

such as alcohol and cigarettes, present in all the age groups studied and in increasing proportion as age increases; values range from 50% to 20% in schoolchildren aged 12 and 13, up to 92% and 67% in the group aged 18 to 19, for each substance, respectively. There are no differences in the consumption of alcohol and cigarettes between public and private schools. Among illicit drugs, marijuana is the substance with the highest prevalence at the national level; its consumption is significantly higher among men than in women and among students who have had behavior and/or discipline problems at school and are repeaters and belong to public schools. (El 2011)

According to the latest study of the Epidemiological Surveillance of Psychoactive Substances (VESPA) of the District Health Secretariat (SDS) of Bogotá, between January and September 2006, addiction care centers in Bogotá reported 3,461 cases of children and young people in treatment for alcoholism and drug addiction. The vast majority of minors start consuming alcoholic beverages between the ages of 10 and 13 and, at approximately 12 year of age, they consume cigarettes and marijuana. The greatest consumption is found among students and the unemployed and is concentrated between the ages of 11 and 25. 56.9% of consumers is found in basic secondary education. (Bandura A, 1969)

The risk factors associated with the perception of risk, attitudes and beliefs facilitate the initiation of drug use. These factors are the favorable attitude towards drug use, positive beliefs about the consequences, normative influences, the intention to use and the perception of risk. (B. A 1986)

Young people today have their own perceptions, they perceive the world in different ways and, therefore, it is necessary to know the meaning they give to drug use and the meanings they give to its prevention.

There is no consensus to point to a theory or model as the most suitable in the explanation and approximation of drug use in childhood. Among the theories that have attempted to understand drug use, are the Social Learning Theory and the Planned Action Theory. (B. A 1995) Derived from the Social Learning Theory, is self-efficacy, which consists of believing in one's own abilities to organize and execute the necessary actions to handle future situations. The Theory of Planned Action (TAP) states that there are several factors that precede and explain human behavior. Specifically, it tries to explain behaviors that are under the conscious control of individuals, based on different determinants that precede and explain them. (Baldwing AR, Oei TPS 1993)

The prevention of drug use must be based on scientific knowledge in around the origin and development of this behavior. However, in practice, prevention is often carried out more around the urgency of implementing measures than based on a thorough analysis of the theoretical application. (Connor JP, Gullo MJ, Feeney GF, Kavanagh DJ 2014)

According to the 1999-2001 management report of the Bogota Health Secretariat, prevention actions were, for the most part, focused on providing information about consumption and its consequences. Impact: This report shows the insistence marked on a risk factor and its design seeks massive coverage, ignoring the particularities of certain

segments of the adolescent population.(De Weert Van Oene GH, Breteler MH, Schippers GM 2000)

In the last 20 years it has been insisting on prevention as an effective strategy to deal with drug use. In Colombia there has been a lack of greater clarity and consensus on the theoretical models that guide preventive actions.(DiClemente CC 1990) The little evaluation carried out in these programs has shown that the actions of those who conceive and implement the prevention programs do so from social imaginaries, taken more from tradition than from a scientific and technical foundation. In this sense, from the authors' point of view, drug use in adolescents and young people must be approached from a comprehensive point of view that allows knowing the reasons why the subjects consume drugs.(Hartzler B, Witkiewitz K, Villarroel N 2011) The objective of this update article is to explore the concepts of self-efficacy and attitude towards consumption from the theories of motivation and behavior human, that allow to understand the meanings of drug use and are applied by the nursing professional to guide the design of drug use prevention programs, adjusted to the real situation of adolescents and young people and, thereby, contribute to the reduction of drug demand. Exploring Concepts: Human Behavior.(Kinard BR 2010)

Human behavior is directly observable, which does not happen with the psychological processes that are triggered before, during or after its execution. It's about understanding, explaining behavior, and predict it before this is done.(Litman GK, Eiser JR, Rawson NS 1977)

When referring to motivation, reference is usually made to why, or how something is done or not done, taking into account internal and external conditions. Motivation allows the description and explanation of human behavior, taking into account not only the factors that cause and determine the behavior process.(Torrecillas FL, Peralta I, Rivas MM 2003)

The analysis of motivational processes is making it possible to understand the causes of activities and act unsuitable, unhealthy or against the law, such as addiction and delinquency.(Torrecillas FL, Caballo V, Pastor Del Carpio L 2005) The importance of motivation is related to how it is viewed, either as an independent causal variable of behavior or as a variable dependent on other factors that allow it to be predicted and controlled. Consumption behavior refers to that which is acquired and maintained by following a model, social reinforcement, and anticipatory effects of the drug, direct experience of its effects such as reinforcement, physical punishment and physical dependence. (MA 1985) Some Important Determinants are stressful life events, pressures, work, family, role of social networks and the social support that the subject has this varies over time, as the influence from one individual to another. The final decision of to consume or not depends on the expectations of self-efficacy and the result that the person has in the situational context in which they find themselves.(Sadowski CJ, Long CK 1993) The anticipated effects of a behavior are those that seem important in determining whether or not this behavior is performed. Some authors have observed the specific role of positive outcome expectations in relation to drug use and its effects on behavior.(Young RMcd, Oei TPS 1991)

Self-efficacy

Albert Bandura proposed the self-efficacy theory as a unified model for understanding behavioral change. Motivation is interpreted as an activity that occurs without the need to be reduced to a specific stimulus. (Verdejo GA, Perez GM, Sanchez BM, Rodriguez FA 2007) Motivated behaviour is viewed as purposeful because it is based on plans, goals, and objectives. Beliefs in our own self-efficacy shape our thoughts, feelings, drive, and behaviour. (Thal DR, Del Tredici K 2004) People who have built confidence in their own ability to overcome life's challenges will believe in their own abilities, which will lead them to feel safe when taking on new challenges. They will also be more motivated to put forth the effort necessary to achieve their goals, which is why they will go out of their way to do so. (Chua EF, Schacter DL, Rand Giovannetti E 2006) Self-efficacy expectations and result expectations are at the heart of this idea. A person's self-efficacy refers to whether or not they believe they possess the circumstances (skills) necessary to carry out a task. Reinforcement relates to the incentive that the expected result represents for the person, while result refers to their perception that this behaviour does lead to that result. (Sherer M, Maddux JE, Mercandante B, Dunn SP, Jacobs B 1982)

A person's ability to deal with high-risk situations is influenced by both their self-efficacy and their outcome expectations. Social and cultural norms, an individual's sense of self-worth, the environment in which they live, and their own ingrained desires all play a role in shaping these expectations. Alcohol and other drugs are frequently used because of the hope that they will have a good effect on one's life. (Peterson C, Semmel A, Von Baeyer C, Abramson LY, Metalsky LI 1982)

Initiation, persistence, and regulation of behaviour are all influenced by efficacy expectations, whether they are learned by direct or indirect experience, verbal persuasion, or physiological state. (SA 1973)

How much effort is put into an action and how long it lasts is determined by how confident the individual is in their ability to carry it out, as well as how well they are able to persevere in the face of impediments. Self-efficacy is activated whenever and whenever a person is competent enough to carry out the task at hand; this results in the proper incentives. Perceived self-efficacy refers to people's belief that they have the power to influence their own motivation and conduct, as well as the social context in which they participate. It is the process of self-efficacy that influences not only the choosing of goals (intentionality) but also how much effort or will the individual will put into achieving those goals. Tenacity in achieving a goal Self-efficacy and certain health behaviours are linked. The belief that one has in one's own ability to succeed in a variety of areas, such as pursuing a career of one's choice, maintaining a healthy lifestyle, accomplishing one's goals, managing chronic diseases, abstaining from drugs and alcohol, engaging in sexual activity, smoking, exercising, and dieting. Health complications may arise. Individuals' performance and well-being benefit from having high levels of self-efficacy. Self-efficacy has been found to be a predictor of drug use as well as a protective factor against drug use, according to the

authors.(Skinner HA 1982) People who don't use tobacco or alcohol have higher levels of self-efficacy and higher levels of self-esteem. People with high self-efficacy levels who don't drink alcohol are also more likely to have reduced alcohol intake. High self-efficacy scores are linked to respondents' conviction that they are capable of sustaining abstinence after treatment begins, making it the most important element to consider while attempting to quit or lessen a smoking habit. Self-efficacy is a risk factor for drug abuse. People who are addicted to drugs have lower levels of self-efficacy, making it more difficult to resist the need to use. This shows that those with lower levels of self-efficacy are more likely to continue using. Self-efficacy is aimed at the essential behaviours to experiment with or begin the habit if young people believe that drinking or ingesting other sorts of substances brings significant benefits for them. Teenagers with low self-efficacy are more likely to engage in dangerous sexual and drug activities, as well as engage in criminal activity. Self-efficacy is the primary motivator for criminal activity, According to psychologists.(F 1996)

However, if they want to give up the habit, they compromise their efficacy relative to their own ability to give it up if they think that consumption offers them with key advantages. Addiction is characterized by internal conflicts of this nature, such as whether or not to begin using or whether or not to stop using. This is how preventative actions must be carried out with great caution, as they may stimulate drug use rather than increase self-efficacy. The younger a person is when they begin abusing substances, the more likely they are to continue doing so. Those who began drinking alcohol earlier in life are more likely than those who started later in life to do so on a regular basis and more often. Study after study has revealed that younger children have higher levels of self-efficacy whereas older groups have decreased levels during adolescence.(Horvath AO 1982)

When it comes to school drug prevention and health promotion, a student's sense of self-efficacy becomes a crucial factor to consider. Taking into consideration this notion, we can anticipate when schoolchildren will begin using drugs. It is vital to promote self-efficacy at a young age and strengthen it among adolescent groups in order to raise the subject's capacity to face life's challenges linked to drug use. (LR 1993)

Attitude

Many of the human behaviors of daily life are considered to be under volitional control. Psychological factors include affective (mood states and emotions) and cognitive characteristics (beliefs and expectations) and social factors include social networks and norms. These two factors will act by facilitating or inhibiting the manifestation of a given behavior and must be considered when predicting the appearance, Maintenance or extinction of a behavior in a certain context. Most of the research that has focused on the study of the different factors that can predict behavior has given special relevance to cognitive factors, and especially to attitudes The Theory of Planned Action (TAP), sometimes known as the Theory of Reasoned Action (TAR), aims to explain the actions of persons that are under their conscious control. It's not the attitude that matters, but the intent to act on it that does. The person's favourable or negative judgement

of each of their ideas about the item (whether it a product, a person, or an institution) is what determines their attitude toward it. The emotional component of an attitude, defining the degree of motivation and the strength of the behavioral intention, is called the affective assessment. Beliefs are important, but they don't motivate you to take action on their own. It shows how important they are to him and how committed he is to them if he has a very high opinion of them.(Connor JP, Gullo MJ, Feeney GF 2011) An action's various starting pieces lead to valuing specific beliefs rather than a generic belief, because each component receives the same level of approval or rejection as any other part of the action. Put on some lipstick and mascara. To be able to accurately forecast a person's attitude and, by extension, their intention, it is helpful to have a thorough understanding of all of their unique ideas about behaviour. Knowing what other people believe about certain behaviours (such as smoking, exercising, or eating healthfully) can affect one's decision on whether or not to engage in a more general one (such as health maintenance), as long as one is motivated by a desire to please those others A person's attitude is influenced by their own personal consequences, specifically the cost-benefit analysis and the emotional weight attached to those consequences. There is a greater risk of drug use since adolescents believe that drugs are not so dangerous and that they are able to get rid of them whenever they like. A good example of this is that adolescents place a higher importance on pleasant feelings and mood shifts. There are stronger favourable results for people who drink a lot of alcohol when they engage in riskier activities. The presence or absence of prejudices and favourable judgments about drugs promotes the danger or protection of consumption, according to research on drug attitudes. (Young RM, Gullo MJ, Feeney GF 2012)Adolescents are most familiar with alcohol and cigarettes as drugs, but they view them as less harmful as a result. When a substance is viewed as unsafe and its usage as dangerous, it is considerably less likely that someone will start using it or progress to compulsive or excessive use. Alcohol use is higher among adolescents who have higher expectations for alcohol than among those who have lower alcohol expectations. Legal constraints and censorship are not enforced in public settings, which makes them ideal environments for consumption. Among men, bars, discos, and parties, as well as cafeterias, cinemas, and the street, are the places where free time and the desire to smoke may be found. People who went to the movies instead of pubs and clubs had lower levels of cigarette and alcohol usage.

Adolescents believe that recreational or occasional use of some substances is less risky, and they believe that they are better able to regulate their use if they do so. More self-regulated people are less vulnerable to risky situations and may exhibit exploratory and occasional drinking that does not lead to dependency. As a rule of thumb, persons who begin drinking at a young age are more likely than those who wait until later in life to begin drinking, and they are also more likely to drink heavily. Refusal of alcohol and value of prevention decline with age, while permissive attitudes rise. As education and age rise, so does supply and consumption, which is linked to social permissiveness.(Lopez Torrecillas F, Garcia J, Canadas GA, Ucles IR 2006)

Macro social characteristics, such as social acceptance and permissiveness, are associated

to an increase in alcohol intake among adolescents despite family intervention and secondary school efforts. Children can more easily keep track of their drug use when they mimic their parents' consuming habits and are allowed to do so; 60 percent of the children who used drugs were given the drug for the first time in a family environment.

Conclusions

Self-efficacy and attitude become important constructs to be taken into account by nursing professionals in order to direct promotion and prevention programs and for them to have a positive impact on the school population. Low self-efficacy individuals are more likely to drink excessively, have a notion that drug use provides a sense of relaxation, and engage in risky activity. When it comes to alcohol intake, those who are less confident in their own abilities tend to drink more and more frequently than those who have higher self-efficacy ratings. Using drugs is a symptom of globalization, which involves a wide range of issues. It is a situation that the nurse must face from the promotion of health and prevention, carrying out projects and programs that help reduce the demand for drugs and improve the quality of life, starting from research and addressing drug use in school children in order to obtain real information, which allows identifying their health situation and proposing new strategies for health promotion and comprehensive prevention, which impact the quality of life of children, their families, school and community. Drug use prevention programs must include the promotion of self-efficacy, favoring the development of social skills, coping with different life situations and decision making. But it is also necessary that these programs have a theoretical model that allows set specific objectives and goals that are specific to psychosocial and cultural environments where these are developed, in order to achieve the expected results and not to encourage risk behaviors such as drug use. These programs must contemplate all the members involved and not only the school children, directing the actions towards the teachers, the family and the community in general, contemplating within them all the public or private institutions that have relationship with school children.

Taking into account that the age of onset of consumption of both licit and illicit drugs has been gradually declining in our country, the school children become the focus of attention programs aimed at reducing drug use, since what is done at this stage of life has repercussions later in the actions of adolescence. The school-age children go through a stage in which the important thing is the development of social skills, it is a stage of emotional calm but their interests are directed to the external environment or social world. Within the framework of 30 years of Primary Care of Health (PHC) it is necessary for the nurse to return to her experiences in the face of health promotion actions and reorient her responsibilities in primary care. These programs must contemplate diagnostic aspects, identifying the real situation of the communities and proposing intervention strategies that involve the student, his family, the school, the community and the economic, educational and health sectors, allowing the integration of social systems, intersect oral organizations and the community, encouraging community participation and health education, which affect the quality of life of students.

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