

SUBSTANCE-USE AS A COPING MECHANISM IN INDIGENOUS STUDENTS

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INTRODUCTION

- Substance use and drinking have been shown to be a serious problem amongst Indigenous youth across the globe, including being related to depression, hopelessness and suicidality (1).
- Very little research exists specifically examining the **motivations** behind this substance-use
- Self-medication models have been suggested (2), but few studies have examined the **underlying mechanism** behind the theory, i.e., **coping strategy**
- The current study seeks to investigate the motives behind the use of substances, in an Indigenous student population. In addition, we will examine whether this maladaptive coping strategy is related to current depressive symptoms.

HYPOTHESES

1. Do Indigenous youth engage in substance-use as a coping mechanism?
2. Are they coping with feelings of distress, or do they have more social, enhancement or conformity reasons?
3. Is this maladaptive coping mechanism related to current depression symptoms?

METHODS

Participants

- Indigenous students
- Projected total sample, N = 60
- Participants are not restricted to a specific Indigenous group
- Bring a registered Tribe member is not necessary

Measures

- Substance-Use as Coping: Modified Drinking Motives Questionnaire-Revised (*mDMQ-R, Blackwell & Conrad, 2003*)
- Depressive Symptoms: Center for Epidemiological Studies Depression Scale (*CES-D, March, 1997*)

Procedure: Global Study

Assessment 1: Following consent procedures, participants complete an online series of 21-scales.

Directly after, a contextual-threat interview is undertaken using the *UCLA Episodic Life Stress Interview* (Rudolph & Hammen, 1999)

Assessment 2: In a follow-up interview conducted one week later, participants complete a clinical interview using the DSM-5 based Mood Disorders Interview (APA, 2013). Participants are then debriefed, and compensated for their time.

The scales for the current study are embedded within the questionnaire package in Assessment 1.

SCALES

- ❖ **Modified Drinking Motives Questionnaire - Revised** (*mDMQ-R, Blackwell & Conrad, 2003*): This scale consists of 28 items, including five subscales: 1) **social** motivations (e.g., *to be sociable*), 2) **coping-anxiety** (e.g., *because it helps when I am feeling nervous*), 3) **coping-depression** (e.g., *to stop me from dwelling on things*), 4) **enhancement** (e.g., *because it is exciting*), and 5) **conformity** (e.g., *to fit in with the group I like*).
- ❖ **Centre for Epidemiological Studies of Depression** (*CES-D, March, 1997*): This scale consists of 20 items, designed to assess **depressive symptoms** over the past week. The CES-D has been shown to be valid and reliable in cross-cultural studies.

RESULTS

We predict that Indigenous students will primarily use substances to cope with their distress, and that this maladaptive coping will be further related to current depressive symptoms.

Coming soon to a poster board near you!

References

1. Stewart, S. H., Sherry, S. B., Comeau, M. N., Mushquash, C. J., Collins, P., & Van Wilgenburg, H. (2011). Hopelessness and excessive drinking among Aboriginal adolescents: The mediating roles of depressive symptoms and drinking to cope. *Depression research and treatment*, 2011.; Turner, R. A. (1999). Risk and protective factors for propensity for suicide among British Columbia First Nations adolescents using the Adolescent Health Survey. Simon Fraser University.; Woodland, J. M. (2014). Native American youth and suicide: Mediators and moderators of the relationship between being Native American and suicidality (Dissertation, Order No. AAI10103761). Available from ProQuest Dissertations Publishing, 2015. 10103761.).
2. Grant, V. V., Stewart, S. H., O'Connor, R. M., Blackwell, E., & Conrod, P.J. (2007). Psychometric evaluation of the five-factor modified drinking motives questionnaire-revised in undergraduates. *Addictive Behaviors*, 32(11), 2611-2632.