



Normative perceptions of non-medical stimulant use: Associations with actual use and hazardous drinking



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HIGHLIGHTS

- 19% of students reported lifetime non-medical use of prescription stimulants.
- Most overestimated other's use and that was associated with higher self use.
- Students living in Greek housing reported higher NMUPS use and perceived norms.
- Normative perceptions of NMUPS predicted alcohol-related problems and disorder risk.

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ABSTRACT

Approximately 10% of US college students are engaged in non-medical use of prescription stimulants (NMUPS) and that use is linked to concerning health, educational, and societal consequences. Few studies have assessed normative perceptions surrounding NMUPS. Accordingly, we examined self-reported use and normative perceptions for NMUPS and demographic factors that may be associated with them. We also investigated whether higher normative perceptions for NMUPS were related to the most commonly used and abused substance among college students (alcohol). *Method:* 1106 undergraduates participated in an online survey of normative perceptions of NMUPS and students' own drinking and stimulant use habits. *Results:* Students overestimated NMUPS by other students and those normative estimates were associated with higher NMUPS. Living in a fraternity or sorority was related to higher NMUPS and perceived norms. Finally, higher normative perceptions of NMUPS were associated with higher hazardous drinking. *Conclusion:* The large discrepancy between actual use (generally low) and students' perceptions (generally high), and the relationship of these perceptions to both one's own use of NMUPS and alcohol suggests that interventions aimed at correcting norms may be useful.

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1. Introduction

Non-medical use of prescription drugs has been defined as “using a psychotherapeutic drug, even once, that was not prescribed for you, or that you took for only the experience or the feeling it caused” by the Substance Abuse and Mental Health Administration (SAMHSA, 2002). Non-medical use of prescription drugs is a significant public health problem in the U.S., with emergency room admissions related to prescription drug abuse increasing substantially between 1997 and 2007 (Fischer, Nakamura, Rush, & Rehm, 2010; SAMHSA, 2007, 2008). On college campuses, there has been increasing attention paid to the non-medical use of prescription stimulants (NMUPS),¹ and concerns

about their misuse have been in the spotlight in coverage by mainstream media. However, there is still a great deal to understand about NMUPS as well as about NMUPS' relationship to other health risk behaviors. For example, how do perceptions about others' frequency of use of NMUPS (i.e., normative perceptions of NMUPS) relate to one's own use of NMUPS? How do those perceptions relate to one's use of other substances? Normative perceptions of peer's substance use have a rich research tradition, and a robust finding is that higher normative perceptions of substance use are associated with greater personal use (see Larimer & Cronce, 2002, 2007, for reviews). Additionally, findings from large scale studies of substance use indicate that use of a single substance is commonly associated with use of other substances as well (e.g., Johnston, O'Malley, Bachman, & Schulenberg, 2013). Thus, the purpose of the current study was to (1) examine college students' NMUPS and their normative perceptions of the prevalence of NMUPS by others, and (2) investigate how these perceptions relate to students' other substance use behaviors, specifically to drinking behaviors.

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¹ Abbreviations: Non-medical use of prescription stimulants (NMUPS); Medical use of prescription stimulants (MUPS).

1.1. Prevalence, correlates, and consequences of NMUPS in college students

Nationally, prescription stimulant use (e.g., Ritalin and Adderall) in college students is at its highest level in the past 15 years. In the context of NMUPS, Adderall is the most commonly used substance with annual rates of 9.0% among college students (7.4% in non-college young adult respondents; Johnston et al., 2013; McCabe, West, & Wechsler, 2007). NMUPS lifetime use rates are up to 20% (McCabe, 2008) and can be associated with a range of unwanted effects, including sleep difficulties (72% of users), irritability (62%), headaches (33%), stomachaches (33%), and sad mood (25%) (Rabiner et al., 2009a, 2009b). A growing number of studies have examined differences between students who report NMUPS and those who do not. Findings from those studies indicate that compared to students who do not report NMUPS, those who engaged in NMUPS had more social difficulties, lower GPA, and reported concerns about their academic performance (McCabe, Cranford, Morales, & Young, 2006; Rabiner et al., 2009b; Teter, McCabe, Boyd, & Guthrie, 2003).

Of additional concern, NMUPS is also associated with increased risk of abusing other substances and experiencing high rates of negative consequences from those substances. For example, college students abusing stimulant medication were more likely than students abusing other drugs to report drug-related problems and to experience nine out of ten drug-related problems as assessed by the Drug Abuse Screening Test-10 (DAST-10) (McCabe & Teter, 2007; Skinner, 1982). With respect to alcohol, in particular, co-ingestion with prescription medication has been documented in national samples (SAMHSA, 2003, 2004) and adverse consequences from this combination, such as drug-related ER visits, are even more likely. Specifically, students who reported co-ingesting alcohol and prescription medication were at greater risk to have missed class or work, driven a car while under the influence of alcohol, driven a car after drinking 5 or more drinks in 2 h, and had blackouts than students who did not use these substances simultaneously (McCabe et al., 2006).

1.2. Normative perceptions of NMUPS

Much research has documented college students' misperceptions of peers' substance use, especially alcohol, and how those misperceptions relate to students own drinking and related problems (Larimer & Cronce, 2007; Perkins, 2002; Perkins, Meilman, Leichter, Cashin, & Presley, 1999). Not only have such normative perceptions become among the best predictors of college student drinking (e.g., Neighbors, Lee, Lewis, Fossos, & Larimer, 2007), but such findings have led to the development and implementation of successful interventions to correct those misperceptions and thereby, reduce risky drinking (Larimer et al., 2007; Marlatt et al., 1998; Martens et al., 2005, 2007; Neighbors, Larimer, & Lewis, 2004; Neighbors, Lee, Lewis, Fossos, & Walter, 2009; Neighbors, Lewis, Bergstrom, & Larimer, 2006). Because studies have also demonstrated misperceptions of the prevalence of other substances and the relationship of these perceptions to one's own use and consequences (e.g., marijuana; Kilmer et al., 2006; Neighbors, Geisner, & Lee, 2008), it is possible that similar misperceptions exist (and ultimately, that similar interventions might be useful) with respect to NMUPS. However, research on normative perceptions of NMUPS is in its early stages and studies are scarce. Initial research suggests that college students over-estimate the prevalence of NMUPS on their campuses (e.g., McCabe, 2008), but this finding needs to be replicated. Additionally, it is important to understand if and how such normative misperceptions relate to one's own NMUPS as well as to one's perceptions and self-reports of medical use of prescription stimulants (MUPS) and to drinking. Further, it will be critical to understand how normative perceptions vary among different groups.

1.3. College related risk factors for NMUPS

McCabe et al. (2007) suggested that college campuses in many ways provide an ideal environment for substance use, including increased access to substances on campus, cultural acceptability for substance use, and peer pressure. In addition, the academic and other pressures faced by college students may lead them to NMUPS in order to stay awake and alert to complete their work and study for exams. Further, McCabe et al. (2006) have suggested that college students may be at higher risk for NMUPS compared to other groups, given the higher accessibility of different medications in the college/university setting, and the likelihood of students sharing their prescriptions with other students (Barrett, Darredeau, Bordy, & Pihl, 2005; McCabe et al., 2006; Rabiner et al., 2009a). Thus, it is important to study factors that may be related NMUPS.

Among those factors that may be important for college students are their gender and their living situation. For example, gender differences are beginning to be documented for NMUPS, with annual prevalence for Adderall use outside of medical supervision higher among male college students (13.2%) than female college students (7.7%) but research has also been mixed (Dluzen & Liu, 2008; McCauley et al., 2011; SAMHSA, 2004). With respect to normative perceptions of NMUPS, specifically, to our knowledge no published studies have examined normative perceptions of NMUPS as a function of gender. Consistent with the pattern of findings observed in the college student drinking literature and the fact that several studies have found greater NMUPS among men, we would expect that men would have higher normative perceptions of NMUPS than women would. In a similar vein, we would expect that living in a fraternity or sorority house would be associated with higher normative perceptions of NMUPS than living in other types of residences. This hypothesis has not been tested to our knowledge, but it is consistent with McCabe et al. (2006) notions that college environment may confer greater access to NMUPS as well as by their findings that fraternities and sororities have been associated with greater NMUPS, (McCabe, Knight, Teter, & Wechsler, 2005).

1.4. Study overview

Given the increasing concern about NMUPS on college campuses and the potential importance of normative perceptions of NMUPS as predictors of NMUPS and other hazardous behaviors, we conducted the current study. Its purpose was to investigate college students' NMUPS, their normative perceptions of NMUPS, and to understand how those normative perceptions related to NMUPS as well as to drinking behaviors. Information about students' medical use of prescription stimulants (MUPS) and their normative perceptions of MUPS was also collected to provide additional context. Additionally, we examined how gender and residence were associated with normative perceptions of NMUPS.

Our hypotheses were as follows:

1. Students' NMUPS and MUPS will be relatively low (e.g., less than 20% of the college students surveyed will report any use at all, and most of those will report rarely using).
2. Students' normative perceptions of NMUPS and MUPS will be greater than self-reports of actual use, and men's perceptions will be higher than women's perceptions.
3. Place of residence will be associated with normative perceptions of NMUPS, with living in a fraternity or sorority being associated with the higher perceptions. No specific hypotheses are offered about other places of residence.
4. Greater normative perceptions of NMUPS will be associated with greater NMUPS and with higher drinking behaviors (e.g., alcohol consumption, problems, and risk of an alcohol use disorder), even after controlling for normative perceptions of drinking behaviors.

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