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**SPECIFICS OF INTERACTION WITH YOUTH PRONE TO
SUBSTANCE ABUSE REGARDING CAREER BUILDING**

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Abstract

Many university students use various psychoactive substances, including drugs. Some of them have problems with drug abuse. Thereafter it provokes problems not only with health, but also with building a future career, life and professional success, reducing motivation to achieve goals. Social and economic changes in Russia have led to a high competition in the labour market and promoted activation of career activity of youth. Students who could not adapt to such activation are left out and cannot find their place in life. Many of them are those who use psychoactive substances. The current study identified a high-risk group of students who are prone to substance abuse. The authors suggested the primary prevention measure for such people in the form of career construction. At the beginning of the sociological research, a questionnaire survey was used. The continuous poll included 5559 first-year bachelor students from eight universities in Tomsk, Russia. The average age was 18. At the second stage, on the basis of the results, the “Profile of the Risk Group” was formed. Finally, recommendations for the development of activities for building the future career for the first-year students were formulated. The authors assume they could be the primary method of prevention of the tendency to use drugs. In particular, trainings were developed in accordance with the objectives of the three stages of professional training of students: adaptation, intensification and identification. The findings of the study are applicable to the interaction on career planning questions with youth prone to substance abuse.

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Keywords: Drug addiction behaviour, primary prevention, building a career, risk group, social adaptation.



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1. Introduction

Mass consumption of narcotic substances in the youth student environment in the long term is a threat to the health of the population, the economy and the security of states. In addition, social and economic changes in Russia have led to a high competition in the labour market. It promotes activation of the career activity of youth. Such processes encourage the desire of universities to train competitive professionals. It is important for them to identify their potential place in the labour market in their student days. This requires career planning in the university. Although, according to some authors, not only university education provides employment and financial well-being opportunities, but also apprenticeship and traineeship contribute to the competitiveness of a specialist (Fell, Fell, & Lukianova, 2017).

Competitive people are focused on success, which “is an internal marker, value of the person in a working process, and it defines meaning of life, the professional status, self-assessment, and relation to work. Thereby it determines satisfaction, trust to himself, self-efficiency, orientation to the future, personal growth, normalization of social wellbeing, self-realization. As a whole, these signs define professional and personal wellbeing, success of the person” (Konyukhova, Konyukhova, Kashpur, & Lokotosh, 2017, p. 345).

Students prone to substance abuse a priori reduce their ability to get professional success (Gray, 2011). Accordingly, primary prevention of drug-addicted behaviour is one of the areas of interaction with young people. It will form a negative attitude towards drug use, since it can directly affect the potential success and competitiveness of future professionals (Sznitman, 2013; Dupont, Merlo, Arria, & Shea, 2013; Lee, Kilmer, Neighbors, Atkins, Zheng, Walker, & Larimer, 2013).

2. Purpose of the Study

The purpose of the current study is to develop career-building recommendations for students who are prone to substance abuse as a method of primary prevention.

Objectives of the study:

- to conduct a questionnaire survey “Psychological proneness to drug addict behaviour” among first-year bachelor students of Tomsk, a university city in Western Siberia of Russia;
- to create a “Profile” of the average student who belongs to the high-risk group of drug addict behaviour (in the given age group) on the basis of the results;
- to develop recommendations for interaction with students on career-building issues as a method of primary prevention of drug addict behaviour.

3. Research Methods

Research methods are the analysis of official reports and documents on drug addiction among youth, questionnaire survey, data cluster analysis, methods of socio-psychological training.

The study of proneness to substance abuse in the student environment and development of recommendations had three stages:

1. Conducting a survey using a questionnaire. Results are presented in a sten scale (sten score). 5,559 first-year bachelor students from eight universities of Tomsk were polled using the method of continuous survey. The average age of the respondents was 18.

2. On the basis of the results, the “Profile of the Risk Group” was formed. Among the specific emotional properties, personal attitudes, behavioural and other characteristics of the risk group, the following factors were designated:

- the “adaptation to the environment” factor (conformal behaviour, accessibility to the opinion of others, inability to defend personal judgments);
- the depressive-anxious factor (feeling of apathy and boredom, inner sense of loneliness, “sensory hunger”);
- the “craving for an adrenaline buzz” factor (weekend for joy, trendy, prestigious passtime).

3. The identified factors helped to develop recommendations on organising events on the future career choosing and building for first-year bachelor students as a way of primary prevention of proneness to substance abuse. Trainings aimed at the formation of an adequate self-esteem, professional intentions, adaptation in the team, acquisition of the socio-psychological status of an expert in a field are among recommended forms of work.

Research description:

At the first stage in 2016, 5,559 first-year bachelor students were polled using the method of a continuous survey. The average age of the respondents was 18.

On the basis of the questionnaire survey results, all the respondents were divided into three groups: students with a high risk of drug addict behaviour (7.5–10 sten scores), students with a medium risk of drug addict behaviour (3.5--7.5 sten scores), students with a low risk of drug addict behaviour (0 to 3.5 sten scores). Thus, using the questionnaire survey “Psychological proneness to drug addict behaviour” the level (high, medium, low) of the subject's proneness to drug addict behaviour is determined.

4. Findings

Based on the results of the study, groups with low, medium and high levels of proneness to drug addict behaviour were identified.

I. A low level of proneness to drug addict behaviour. It assumes a complete lack of narcotic and psychoactive substances use by this category of subjects. Specific properties and characteristics of this category of subjects are practically not detected or little expressed. The risk of forming drug addiction in this category of subjects is low.

30.75% of the respondents (1,711 people) belong to this group. Adaptive personal attitudes and active coping strategies dominate in their behaviour; they have social and environmental resources of coping with stress and psycho-emotional stress, namely:

1. The individual is fully aware of the negative consequences of using drugs and psychoactive substances.
2. The individual has family, stability and connection, adequate parental upbringing and companionship and trusting relationships with family members.
3. The individual has a high emotional and strong-willed control over expressing emotions.

4. The individual has psychologically healthy motivations, needs, senses and values.
5. The individual has no experience of dealing with drug addicts; avoid visiting places that are potentially dangerous in terms of communication with drug-addicted people and infection.
6. The individual is not inclined to adventurism, recklessness, carelessness and momentary actions.
7. The individual has critical thinking, is able to make independent decisions.
8. The individual does not have unmotivated fears, high anxiety, emotional discomfort.
9. The individual easily handles the difficulties of everyday life, acute crisis situations.
10. The individual is able to live in accordance with social principles and generally accepted norms in the society.

II. A medium level of proneness to drug addict behaviour. It assumes a single use of narcotic and psychoactive substances by this category of subjects. Subjects included in this category constitute a moderate risk group for the formation of a drug addiction. 40.28% of respondents (2,239 people) belong to this group.

Psychologically, respondents of this group are characterised by a number of specific emotional-personal predispositions, behavioural characteristics, etc. The following points can be noted:

1. The individual is well aware of the negative consequences of using drugs and psychoactive substances.
2. The individual strives to get exciting emotions and new “extreme” sensations.
3. The individual experiences self-doubt, periodic fluctuations in self-esteem.
4. The individual emotionally experiences the psychological traumas of childhood and adolescence.
5. The individual has violated family relationships, alienation and negative psychological climate in the family.
6. The individual is impulsive, tends to act at the first jet, under the influence of an instantaneous mood.
7. The individual prefers and chooses non-standard behaviour strategies, lacks adequate environmental resources for coping with stress and overcoming psycho-traumatic situations.
8. The individual is careless, reckless, prone to stable stereotypes of deviant behaviour, social deviations.
9. The individual is undisciplined, selfish, egocentric.
10. The individual craves for immediate success, expects instant happiness, bright mood, tends to hedonism.

III. High level of proneness to drug addict behaviour. It describes the high psychological readiness of the subject to implement addictive behaviour. It assumes a rare or periodic use of drugs and psychoactive substances by subjects of this category. Subjects of this category constitute a high-risk group for the formation of the drug addiction (Looby, Kassman, & Earleywine, 2014; Fanale, Maarhuis, Wright, & Caffrey, 2017). 28.97% of respondents (1,609 people) belong to this category.

At the second stage of the research, the profile of the risk group was identified. When we analysed official reports and documents of all eight Tomsk universities, we saw that first- and second-year

bachelor students are more prone to drug addict behaviour. It is understandable, since they have not yet moved away from adolescence with its tendency to a high level of aggression, alcoholism and drug addiction. Third- and fourth-year bachelor students are less prone to drug addict behaviour. On the one hand, this is due to the natural dropout, since a drug addict cannot do well academically. On the other hand, the tutors' work with first- and second-year bachelor students shows results. In comparison, the risk group among first-year bachelor students is 28.97%, among fourth-year bachelor students year it is already 13.41%, among first-year master students 9.12%, among second-year year master students 4.23%. It is also worth to note the distribution of students by the place of residence during the period of study at the university. People from the group with a high risk of proneness to drug addict behaviour live (in %): with parents or relatives: 30.65%, outside the family (hostel or rented housing): 64.78%, with their own family: 4.57% (Report on the results of social-psychological testing of students aimed to the earliest identification of the drug abuse and psychotropic substances, 2016).

Psychologically, respondents of the "risk group" of first-year bachelor students have a number of specific emotional features, personal attitudes, behavioural and other characteristics; namely:

1. The individual has drug addicts among friends and relatives.
2. The individual "craves for an adrenaline buzz", is prone to risk due to the personal experience of overcoming a danger (in particular, associated with using drug and psychoactive substances).
3. The individual periodically experiences apathy and boredom, has the inner feeling of loneliness.
4. The individual has "sensory hunger": a lack of impressions and attention from significant others and surrounding people, curiosity, desire for new impressions and sensations.
5. The individual has a conformal behaviour, complies with the opinions of others, is unable to defend their judgements, depends on the actions of others.
6. The individual has an inadequately high or low self-esteem, unstable self-attitude, low self-control.
7. The individual has a desire to "escape from reality" to the world of illusions, to "live in the virtual world", constantly spends time on the Internet, etc.
8. The individual has a self-destructive and self-damaging behaviour, tolerates pain easily, changes their attitude to pain and its meaning, has an attitude to pain as a desired feeling (sensation).
9. The individual has changes in the motivational and sense sphere, rejects socially approved values, meanings.
10. The individual forms extremely stable, low-efficient mechanisms of psychological defence: denial, repression, rationalisation, etc.

At the last stage, the identified factors helped to create recommendations for developing building a career activities for first-year bachelor students as a way of primary prevention of drug use. Full or partial implementation of these recommendations can establish a protective barrier. The actualisation of protective factors can lead not only to a decrease in the number of students joining the high-risk group, but also to a decrease in the number of members of this group. Preventive measures will help to consolidate the result (Scheier, Newcomb, & Skager, 1994).

Prevention of the use of psychoactive substances, especially drugs, has been a subject of research in various countries for a long time. It is connected with the fact that this approach can be used for

different age groups, from the junior school to the university. One of the best ways is to realise them in the format of education and training (Skinner, & McCallion, 2010; Nicholson, Duncan, White, & Stickle, 2013; Okamoto, Helm, Pel, McClain, Hill, & Hayashida, 2014). Prevention is the process of forming the resources of the individual and the environment, as well as effective person-environment interaction. It is generally accepted to single out primary, secondary and tertiary prevention.

Primary prevention of dependence on drug and psychoactive substances aims to prevent the beginning of psychoactive substances use by people who have not previously used them. It is predominantly social, most mass and focused on the general population of children, adolescents and youth. Primary prevention aims to reduce the number of people who may have the proneness, and its efforts are not so much to prevent the development of the problem with drugs, but rather to build the ability to maintain or improve health.

Secondary prevention of proneness to substances abuse is selective. It is set for people who have episodes of substance use, or people who have signs of emerging drug dependence in its initial stage. Secondary prevention is required when dependence can appear (prevention for the medium-risk group) or when it has appeared, but has not reached its peak.

Tertiary prevention of dependence on drug and psychoactive substances is predominantly medical, individual and focused on patients who stopped using narcotic and psychoactive substances.

Development and approbation of various drug prevention programs among student youth is a relevant scientific and applied practical trend of specialists and public organisations. Substantial progress in the field of drug abuse prevention is provided by developing approaches that focus on understanding preventative measures as a one of the best ways that takes into account, first of all, psychosocial and personal factors, and that could build protective barriers at the onset of drug addiction. The analysis of the content of different approaches has not only theoretical but also practical interest.

It is possible to identify the following approaches:

1. An approach based on the dissemination of information about drugs and substances. This approach is one of the most common types of preventive strategies, based on the provision of partial information about drugs, their harmfulness and the negative consequences of use.
2. An approach based on affective (emotional) learning. This approach concentrates on the feelings, experiences of the individual, their skills in recognising and managing them.
3. An approach based on the role of social factors. Preventive strategies targeting social factors that promote drug use are based on the recognition that peer and family influence plays an important role in this process, contributing to or hindering drug addiction.
4. An approach based on the formation of life skills. Life skills are skills of personal behaviour and interpersonal communication that allow people to control and direct their life activity, develop the ability to live together with others and change the environment.
5. An approach based on the alternative substitution of drug use. Followers of this approach suggest that meaningful activities alternative to drug addiction could reduce substance abuse.
6. An approach based on health promotion. Health promotion is a process that helps to strengthen control over certain health parameters, and thus improve it.

7. Integrative approach. This approach is a combination of preventive strategies used to implement the above approaches.

In terms of career building, multi-component programs help to obtain a joint effect of a combination of multidirectional preventive strategies. There is a separate psychological direction today that is engaged in studying the career and its phenomena. The very term “career” in scientific and psychological research is treated differently. In this study, we consider the career as a path in professional activity, which leads to the achievement of professional skills, high professionalism and professional competence (Klimova, 1996).

At the stage of vocational training each student goes through three stages: adaptation, intensification and identification. In accordance with the tasks of each of these stages, it is necessary to carry out a number of actions that will allow creating the necessary image of ways to achieve the set goal in the future. In other words they can assist in developing a plan for building one's own career.

At the adaptation stage, former schoolchildren (first-year bachelor students) adapt to the conditions and content of the vocational and educational process, find a place in the new social space and establish relationships with each other and with the staff. At this stage, trainings focus on adaptation to the educational and cognitive environment, on developing a new style of life, on motivation to learn new skills.

At the stage of intensification, the development of general and special abilities of trainees, intellect, emotional-volitional regulation, responsibility for one's own development, and independence are taking place. Here the trainings are focus on developing the students' self-education skills, manifestations of an optimistic social position and independence, the desire to determine the disciplines of specialisations that are of greatest interest.

At the final stage of vocational education – the stage of identification – the formation of a professional identity, readiness for the future practical activity in the specialty, becomes important. At this stage, trainings aim to develop students' clear awareness of their belonging to a certain professional community (“I am a manager”, “I am a lawyer”, “I am a physicist”, etc.), ability to professional self-presentation (e.g. to be able to adequately represent oneself and make a good professional impression).

At this stage, the focus of trainings depends on the choice of one of the career types: social, qualification, rank. Social career presupposes a person's focus on raising the social status, recognition of their merits by society. Qualification career assumes the desire of a person to be a professional in their business, to achieve a high level of skill. Rank career involves achieving a certain formal status in professional activities (Alexandrova, 2007).

5. Conclusion

Implementation of recommendations for career building in the primary prevention of drug addiction in the form of training sessions will allow people to form a clear image of their career path during their studentship. Moreover, it will help them to become competitive professionals who intelligently choose a job and receive satisfaction from their professional activities.

The results of the study are applicable for interaction with students prone to drug abuse in universities of any city. Applying the described diagnostic technique, it is possible to identify the “risk

group” and determine factors that motivate the use of narcotic substances. Further, on the basis of the obtained profile of the “risk group” the approaches of the primary prevention of drug addiction are selected.

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