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Drug abuse among young female adolescents (15-25) in Maryland U.S: Causes behind the drug abuse and the role of social work organisations in its prevention.

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Johnvianney Okpala acknowledgements:

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Abstract:

The abuse of any form of illicit substance is referred as drug abuse. Excessive use of addictive (legal or illegal) substances is defined as utilizing them to the point that their effects become hazardous to the user's health. As the impact of drug abuse are disastrous to individuals and societies it is important to find what leads to it and how it can be prevented. This study focuses on the causes behind drug abuse and prevention strategies. The target group is female adolescents as most of the time target population in earlier research has been generalised to age or gender ignored women or age-specific women conditions. The interviews have been conducted with social workers in Maryland to investigate about the cause and prevention strategies of drug abuse regarding female adolescents. Maryland has been selected as it is one of the states with rate of drug abuse. The results have concluded causes as dysfunctional families, peer pressure, availability of drugs, and social media. Prevention strategies that have been concluded are family-based prevention strategies, community-based prevention, school-based prevention and cognitive behavioural therapy.

Contents

INTRODUCTION AND BACKGROUND:

Drug abuse is a problem that many people in the United States of America are facing today. It is an issue that attracts the interests of many researchers. It has attracted researchers to write an essay on drugs with the aim of eradicating the problem from society as it is very harmful and has the capability of causing death and destruction to both societies and individuals. The authors of the thesis decided to direct our focus to female adolescents from the age of 15–25, knowing that they are more likely to abuse drugs and are one of the groups that is ignored (Schinke, et al, 2008). Maryland USA is targeted because of the high rate of Drug abuse in the society (NSUDH 2019). The study focuses on the factors involved in influencing female adolescents toward drug abuse. It also focuses on the plans and strategies in place that can help female adolescents to avoid drug abuse or reduce the drug abuse.

Drug abuse is a public health concern in the United States (U.S.). Das et al. (2016) explain that adolescence is a developmental period associated with the onset of behaviours and conditions, including drug abuse, sex, and drinking alcohol. Adolescents are more likely to engage in unhealthy behaviours during this period, including illicit drug use, smoking, and drinking, resulting in increased morbidity and mortality rates (Das et al., 2016). Kulak and Griswold (2019: p.682) noted that "32.8% of adolescents have used alcohol and 10.8% of them have also smoked cigarettes in the past 30 days. Drugs are used for different purposes, such as diagnosis of disease, killing bacteria, or inducing intoxication for some purposes. Drug abuse can be explained as the use of drugs in a way in which they were not intended or in a way that can be harmful for health (Sussman & Ames, 2008). The research below has investigated the use of illicit drugs in an abusive way (Kulak & Griswold, 2019). Marijuana, heroin, opioids, etc. are drugs used for illicit purposes. A person that uses drugs may feel relaxed, calm, and altered. Substance abuse, alcoholism, and use of other drugs negatively affect individuals, communities, and families, resulting in increased costs for social, physical, and mental health issues. Kulak & Griswold (2019).

This study two has focused on drug abuse. The first focus is to find the reasons behind the drug abuse. These can be environmental, societal, family, or individual choices (Sussman & Ames, 2008). The second focus of the study is on the functioning of social work organisations that work with drug abuse. These can be environmental, societal, family, or individual choices (Sussman & Ames, 2008). The second focus of the study is on the functioning of social work organisations that work with drug abuse. There is a history of social work interventions such as counselling, which involve cognitive-behavioural techniques for individuals. For society, prevention strategies such as community workshops, education about drugs at school, and campaigns launched to educate people about the consequences of drugs are common (Sussman & Ames, 2008). In this thesis, the authors have inquired into what kinds of strategies and approaches for preventing drug abuse are present in Maryland, USA.

Drug abuse can lead to negative consequences for individuals, families, and society (Sussman & Ames, 2008). The effects of drug abuse on an individual's life and society are disastrous. These consequences can be behavioural problems, poor performance in school, problems in relationships, and poor performance at work and other activities. There are some other serious consequences in an individual's life in society, such as depression and anxiety, which can lead to suicide, while the negative consequences for society can be traffic accidents, crimes, fights due to intolerance, and the trend of drug use among youngsters in the future (Sussman & Ames, 2008). The impacts of drug abuse stay in society for a long time, and places with high rates of drug abuse may have a low human development index. The other long-term impacts can negatively affect the next generation in ways like stunted growth and mental impairment (Sussman & Ames, 2008). These consequences make drug abuse a social problem that has brought attention to the authors to investigate this subject.

1-: Purpose and Problem Area:

These dissertations show that the number of drug addicts in the USA is quite high, and it is 17% among women (NCDAS, 2022). This shows that the country has a problem with drug abuse at a high rate. But as the U.S. has many states, focusing on the whole country may not provide appropriate results. The cultural, ethical, and environmental dynamics differ in every state, as do the reasons and causes behind drug abuse (Zimmermann & McKelvie, 2021). The state of Maryland, USA, was selected as the place where the rate of drug abuse among female is 5.9%. in which 18.3 for age 15-17, 9% for 18- 25, and 3.4% for 26-44 (MD, Department of Health, 2014). This shows the rate of drug abuse is high among the age of 15 and 25 so the study focuses on female adolescents in Maryland. The state has witnessed a significant increase in drug related deaths in the first quarter 2020. The drug related deaths have been 626 in the first quarter of 2020 which are 0.8 % more than the first quarter of 2019 which 621, out of these 89.6 % are opioid related deaths (Maryland opioid operational command centre, 2020). Previously heroine related deaths have also been tripled from 2011 to 2015 which rose from 247 to 748 (Johnson & Ekberg, 2018). Maryland is among the five states with highest opioid related fatal overdoses, in 2016 the rate of opioid related deaths in USA was 13.3 for 100,000 while it was 30 to 100,000 in Maryland and this rate is well above the average rate of opioid related deaths in USA (Johnson & Ekberg, 2018).

Previous surveys have also shown the high rate of drug abuse in Mary land. According to the report of NSUDH (2016-2017) the rate of marijuana use between the age of 12-17 in Maryland fall in the second highest categories of states which is 13.31%-14.91%. The rate of Marijuana consumption among the age of 18-25 has also been categorised in the states with second highest number which are 35.27%-40.51%. Maryland also falls in the second highest categories for the use of cocaine for adolescents 18-25. The rate of cocaine use in 2016-2017 is 5.82%-6.52. These trends were also followed in 2019. According to the report of National drug court resource centre (2019) the use of Marijuana in Maryland was 15.2 % which is higher the Mississippi (11.4%), Alabama (11.6%), New Jersey (12.4%), Utah (10.7%) and many other states such as Florida, Pennsylvania, and Indiana. According to the same report the rate of cocaine and heroin use is 2.0% and 0.5% which is higher than many other states such as Mississippi (1.3% and 0.2%),

Alabama (1.6% and 0.3%), Utah (1.6% and 0,3%), New jersey (1,7% and 0.5%) and may other states such as Tennessee, Kentucky, Florida and Arkansas.

Young teenage females are the target population since they are more susceptible to drug abuse than men because they are more concerned with peer approval (Schinke, et al., 2008). Previous investigations have been conducted while focusing on the general population or without a focus on specific age. Women's-specific conditions have been ignored before in some studies, so this study is aimed at focusing on female adolescents in Maryland, USA. The purpose of the study is to conduct an investigation into drug abuse regarding its reasons and prevention strategies. The target group is female adolescents in Maryland, U.S. and the source of information will be social work or organisations (Alvesson & Sköldberg, 2018).

AIMS, SPECIFIC ISSUES, AND RESEARCH QUESTIONS:

The study aims to investigate the causes behind drug abuse among females (15-25) in Maryland, USA, and the role of social work organisations in its prevention. The information has been obtained from professionals working with drug abuse cases in private social work organisations and NGOs.

1-: Research Questions:

1. What are the causes behind the increase in drug abuse among female adolescents?

2. What are the prevention strategies and plans of the social work organisation in this case for female adolescents?

METHODOLOGY:

The study is qualitative as it seeks the explanation of certain issues from the participants. This study aims to inquire about those causes behind drug abuse and the strategies applied by the social work organisation in its prevention, so the answers are the opinions and views of the social workers and then analysed with the views of previous research and theories. The answers were aimed to be in non-numerical and non-statistical forms and to get a deep insight into both research questions and aims, the suitable method to be used is the qualitative method. (Kvale & Brinkmann, 2015) Qualitative method allows to obtain the data through conversational methods, so it provides in-depth and extensive understanding of the problem as it allows further probing through follow-up questions. It provides the opportunity to attain information in depth from the respondents. Qualitative methods provide the possibility to analyse the diverse opinions of the participants in the best possible way (Alvesson & Sköldberg, 2018).

1-: Mode of Procedure:

The source of information is social work organisations, so purposeful sampling is to select the participants from the organisations that meet the criteria. Interviews have been conducted with those social work staff and members of the drug rehabilitation organisations who directly work with the victims of drug abuse. Interviews were used because it is the best way to understand the causes and strategies and has helped the authors to explore more widely into the problem (Kvale & Brinkman, 2015). Four participants were selected in which 2 were counsellors, 1 therapist and 1 community social worker. Counsellors and therapist were selected from private social work organisation that work as drug rehabilitation and recovery centre. The community social worker

interviewed belonged to an NGO which specialises in community-based work. The interviews were done through email and online using software Zoom and Microsoft teams. The semi-structured interview questions were used to explore more into the research questions and aim. The interviews conducted through zoom and Microsoft teams were done in a manner as one researcher was responsible to ask interview questions and second was responsible for typing and noting quotes. Two of these interviews were conducted in this manner and not recorded. One of the interviews conducted on zoom was recorded through phone recorder after approval of the participant. This approval was granted on the assurance of keeping the data safe till the creation of results and then deleting the recording from phone. One interview was conducted through email, answers were sent back through a PDF file. Some clarifications were later sought about the things which were unclear in the text. The response from interviews was later used in the results. Collected data has only been used by the authors in the results and only the authors are allowed to have access to the data.

The other source of information is literature such as Sussman & Ames (2008) & Kvale & Brinkmann (2015). Sussman & Ames (2008) was used to explore our work because the scholars have done a lot of research on causes of drug usage and drug-related remedies and their text addresses conceptual concerns around drug use, misuse, abuse, and dependency definitions. Importantly, their work covers a number of theoretical underpinnings that are now being used to build preventive and cessation programs, as well as particular program material from evidence-based programs, as well as program procedures and modalities. Sussman & Ames (2008) is used to learn deeper into the drug abuse problem. It has helped us in understanding various causes of drug abuse and its consequences on individuals and communities. This information has later helped us in formulating interview questions. Kvale & Brinmann (2015) is used to understand how the interview should be conducted and how the best information can be gathered through interviews. It has also helped in formulating an interview guide. This literature also helped us to understand the research method and ethics to be considered during the interview.

2-: Analysis:

The responses from the participants were later manually transcribed by the authors. As the communication language was English so no translation was required. Each interview was transcribed separately. First the answers of semi constructed interview questions were transcribed, later the data related to the research questions was sorted out to mention as quotes in the results.

Thematic analysis was used to identify themes, i.e. patterns in the data that are important to divide the data into different sections. Themes are used to address the research problem in different parts for a clear explanation for the reader. This is much more than simply summarising the data; a good thematic analysis interprets, explains, discusses, and makes sense of the whole text. (Braun, & Clarke (2006).

3-: Ethical Consideration:

A consent letter was sent to the participant to gain informed consent regarding their participation. Interviewees had the right to withdraw from participation at any time. He/she was not forced to participate but at free will. In that same letter, participants were provided information about the thesis project and the type of questions they should expect which provided them with an idea of where and in what sense their information should be used. To avoid any sensitivity and to get accurate answers to the research question, victims of drug abuse were not contacted, and the professionals working with them were interviewed (Brinkmann & Kvale, 2015). The participants were not forced to answer the question that they weren't allowed to answer themselves. They were also allowed to take a pause or break during the interview and are allowed to withdraw from the interview at any time. The identity of the staff has been kept confidential, and the participants were informed about it before the interviews. The information received from the participants was safely secured and was deleted after the research project (Brinkmann & Kvale, 2015).

4. Credibility:

There is more than one organisation involved in the investigation, so it is expected that they will provide diverse opinions. (Patton, 2002) Multiple sources such literature, previous research, theories, and interviews were validated against each other to create a conclusion which is visible in results. Credibility was also considered through purposeful sampling because it allowed to choose the most articulate respondents for interviews.

1. Reliability:

Triangulation has been used to connect the previous research, theories, and interviews (Payton, 2002). The way of achieving reliability in the text was to confirm the results through the similar research and literature. These were then compared to the theories to confirm that the answers are according to the theoretical concepts.

2. Validity:

The interview guide and questions were created with the help of (Kvale & Brinkman, 2015) so that we could get the information which is most clear and validated. Further follow up questions were also used to confirm the validity of the answers.

3. Generalisation:

The results of research questions can be claimed to achieve generalisation when the results represent the targeted population of the research (Polit & Beck, 2010). The causes and prevention strategy cannot be generalised to the bigger part of the population of Maryland but only on targeted groups within the chosen age range. It is because the answers were collected from professional social workers working from those areas. There is a possibility of further generalisability if more participants from different social work organisations could have been interviewed and more causes and prevention strategies could have been collected as data. Further generalisability also includes covering the population of all the cities in both urban and rural parts of Maryland.

Limitations:

We have anticipated difficulty on how to visit the two chosen organisations in America for physical observations, not just for interviews. But it seems to be difficult because of the ongoing pandemic. The later investigation was conducted through interviews. Maryland is a big population and has more than 2 cities. Baltimore and Waldorf may provide accuracy in results to some extent but including more participants from more social work organisations will bring more information and create better results. The researchers will be able to gather more causes and prevention strategies present in Maryland.

EARLIER RESEARCH:

The dissertation shows that youngsters are more vulnerable than adults to drug abuse (Squeglia& Cservenka, 2017). The reason behind vulnerability is neuropsychological as adolescence is the age of development of brain. At this age youngster are mostly likely to adapt risk taking behaviours. Any imbalance in brain development at this stage which is caused due to their activities and environment can makes them more vulnerable to take harmful decisions such as drug abuse (Squeglia& Cservenka, 2017). Youngsters also tend to follow social trends, which sometimes include drugs. Some are included in social gatherings where the use of drugs is common (Schinke, et al., 2008). It has been reported that 35% of high school students have used marijuana once in their lifetime in USA. It is one of the most commonly used drugs among youngsters in the USA, but the use of drugs varies geographically in the USA. In Maryland, drugs used go beyond marijuana and include heroin, cocaine, and steroids, which are consumed for non-medical purposes. (Schneider, et al., 2020). The most lethal substance for drug abuse among youngsters in Maryland is polysubstance, which means using a combination of more than one or two drugs at a time. An example is using heroin and cocaine at the same time. It can be injected and overdosed by youngsters and can lead to HIV and Hepatitis C infections (Schneider, et al., 2020). Creamer et al (2016, p.1) established that "Adolescents who participated in the Youth Risk Behaviour Survey (a survey of students in grades 9 to 12) in 2015 indicated that

32.8% of them have used alcohol and that 10.8% of them have smoked cigarettes in the past 30 days". Therefore, many youths in the U.S. use alcohol. Similarly, Subsequently, adolescents who use alcohol and other drugs are prone to risky behaviours, which affect their health. Kulak and Griswold (2019) noted that alcohol was the most abused substance by adolescents in the U.S. Also, adolescents were involved in binge drinking. Peiper et al. (2016) established that more than 27% of the alcohol-using adolescents aged 13 to 18 years mix alcohol with energy drinks and use tobacco with prescription stimulants and marijuana.

Girls are more vulnerable to depression and stress because of peer pressure, and they are more likely to abuse drugs (Schinke et al., 2008). One of the reasons of vulnerability is family associated bonds. Inappropriate parental supervision and control and unstructured environment at home leads to a higher level of depression and can be correlated with drug abuse. An unstructured environment means chaos, or financial and relationship crisis. It later leads to less monitoring by the parents, and research shows girls with strong maternal relations are less vulnerable to drug abuse and vice versa (Schinke et al, 2008). The research states that social groups or friends become the biggest factor that leads to drug abuse among female adolescents (Schinke et al., 2008). According to research, girls who returned home after school had a lower percentage of drug abuse than girls who used to spend more time with their social group outside the home (Schinke et al., 2008). It has also been established that the consequences of drug abuse among women are graver and they are more vulnerable to committing suicide and having severe health issues. It is because of biological differences such as the production of testosterone and oestrogen in the body (Bezrutczyk & Hampton, 2021).

Social work organisations can play a part in curbing drug abuse. Prevention strategies for the whole community can be planned and implemented to create awareness among people. Counselling treatment for individuals includes different therapies used in individual cases to help them recover. In this research, an internet-based program was used to help female adolescents to prevent them from drug abuse, and this intervention helped in decreasing the use of drugs among the clients (Schwinn M. et al., 2010). The program was named "Real Teen" and girls were recruited through social media ads. The interventions included interaction with girls and skill acquisition such as refusal skills. A follow-up survey found that 52% of girls who participated in this program had less or no use of drugs after 1 follow-up was conducted. This shows that

through the presence of prevention plans and interventions, the risk of drug abuse can be decreased, and that, in its absence, worse results can be expected in the future.

THEORIES:

1-: System Theory:

The actions, choices and beliefs of an individual are influenced by the social system around him. The objects in a system are connected and they have the capacity to influence choice and decision-making of an individual about his life (Payne, 2014). As in this study system theory has been used to create an understanding of how the surroundings and objects connected to an individual lead to drug abuse. The first part of the aim is about the cause and reasons behind drug abuse and how one person is influenced to decide about consuming drugs. **Systems theory** is suitable for this study as it is based on the idea that behaviour is influenced by a variety of factors that work together as a system (Payne, 2014) These environmental factors mentioned in system theory that affect one's behaviour are family, friends, relationship problems, and economic difficulties (Payne, 2014). It can be perceived that stress received from these environmental factors can lead to drug abuse, which a person can use as a coping strategy. (Schinke et al., 2008) As previous research has shown, factors such as inter-family relationships, financial difficulties, social trends, social groups, and relationship responsibilities can have an impact on an individual's life and can make him/her attracted to drugs. All these factors are collected for psychological equilibrium and thus create a sense of stress and depression in an individual's mind (Payne 2014). The coping mechanism that an individual prefers in these situations is overdosing on drugs or drug abuse.

The theory has classified the systems into subsystems consisting of microsystems, mezzo systems, and macrosystems (Payne, 2014). These systems help to view drug abuse problems as an individual case or provide a bigger picture of the problem, such as the whole society. This

theory helps us to connect these different systems and conclude the causes that lead to drug abuse. The theory also helps with social reforms in the community and helps individuals through interventions which is related to the second aim of study "Prevention Strategies". System theory focuses on the resilience of an individual and how an individual can recover from adversity. It helps in analysing these causes that are addressed in prevention strategies, and this helps to understand the importance of resilience to fight the problem (Payne, 2014). System theory interventions include psychodynamic and therapeutic processes that aid in the empowerment of anti-oppressive issues and the coping of individuals with stress (Payne, 2014). This is one of the prevention strategies mentioned in interviews.

2. Crisis Task centered Practice:

This theory provides long-term solutions for the problems that require immediate attention and drug abuse is one of those problems (Payne, 2014). The first part of the theory is the crisis and drug abuse is a crisis for the victim and the community. The other part of the theory is a task-centred practice which includes intervention and strategies. The task-centred interventions in this theory are supported by previous research. This theory helps to create a plan to solve the social issues or problems faced by society or individuals in a way that has been previously explored. Task-centred practice is suitable for this study as it prioritises its focus on crises which are usually those social issues that affect a large part of society (Payne, 2014). Drug abuse is a social issue for a larger part of the society and task-centred practice diagnoses the problems by identifying the causes and later moves toward the solution of the client's problems (Payne, 2014).

As previously explained in system theory, there are various factors in the systems that lead to a person's decision to consume drugs. The task-centred practice focuses on real issues such as problems in individuals' lives. Those problems are identified and then addressed on priority. Both the client and the practitioner are responsible for efficiently undertaking the task to provide better results (Payne, 2014). The foremost focus of this theory is to make the client focus on its priorities. If the client fails to do that, then it's difficult to attain successful results. In this practice, contracts are made with the clients so they can agree to a plan and then stick to the process of undertaking tasks. In the case of drug abuse, clients' willingness to get rid of a drug

abuse problem is necessary (Schneider, 2020). This theory provides us to examine the nature of prevention strategies and its efficiency.

RESULTS AND ANALYSIS:

The results are information from the interviews conducted with four social workers, and it is divided into two parts and later into themes. Thematic analysis is the strategy used to divide results into themes. These themes are created not to limit the results and create patterns which can expand the results and provide flexibility in the results. (Braun & Clark, 2006) The first part is about the causes of drug abuse among female adolescents in Maryland and the second part is about the prevention strategies exercised by the social work organisations in this case.

The Four Participants are:

Participant 1 (Counsellor)

Participant 2 (counsellor)

Participant 3 (Therapist)

Participant 4 (Community Worker)

1. Causes of Drug Abuse Among Female Adolescents:

Participant 2 stated that *"multiple factors influence teenagers and adolescents who indulge themselves in substance abuse, alcoholism, and smoking. The factors are alcohol and drugs availability, peer pressure, dysfunctional families, social media or stress, and depression".* [MH1] These factors were commonly mentioned by all the participants many times so these were later created into themes.

1-. Themes:

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a) Dysfunctional Families.

b) Availability of Drugs

c) Peer Pressure

d) Social Media

A-: Dysfunctional Families:

Participant 3 stated, *"Lack of attachment and connection between teenagers and their parents also increases the risk of drug abuse".* According to the participant, a healthy relationship between parents and children is necessary so that children can trust their parents. When female adolescents experience a bad incident outside the home and share it with their parents, they do feel a sense of relief when they are supported by their parents. In the absence of that support, they crumble to stress and depression and become a victim of drug abuse. Further following up on the claim, stated that *"Child mistreatments such as child maltreatment and physical abuse by the parents is linked to stress and depression"* According to the same participant, female adolescents who have been abused or mistreated are more likely to use drugs. The respondent also mentioned that more than 20%-25% of children reported incidents of maltreatment, which compelled them to engage in drug abuse. Also, 16% reported that they were maltreated and that this resulted in abusing substances.

Participant 3 later explained Sexual & physical abuse is linked to stress and depression, which might compel teenagers to use drugs, including marijuana, nicotine, and alcohol. Being a victim of physical or sexual assault increases the risk of a female adolescent getting involved with substance. As a result, abused children and adolescents find comfort in drugs and use them to move away from reality and avoid the truth of sexual abuse and physical abuse. For emotionally abused children, substance use is a form of coping mechanism. It helps the abused live in different worlds. Cocaine, ethanol, opiates, and nicotine are examples of some of the drugs abused by adolescents and teenagers from emotionally abused backgrounds.

Similarly participant 1 stated "Poor parenting can lead young females towards wrong practices" Participant 1 later identified poor parenting as prenatal maternal smoking, low parental education, poor maternal psychological control, uncontrolled pocket money, negligence, poor supervision, and substance-using family members. The participant also noted that high parental protectiveness increased the desire of adolescent females to try drugs, such as tobacco, cigarettes, and stimulants. Participants also said that there was no single cause of drug abuse but rather an interconnection of multiple factors. Systems theory has focused on these smaller systems which later create a greater impact when connected to larger systems (Payne, 2014). Poor parenting is a system which affects the behaviour of individuals due to its ability to create psychological impacts.

B-: Drug availability:

According to participant 4", *drugs are quite common among the youngsters in Maryland and it is because many of these substances are easily available"*. Participant 4 later explained that drugs being common is also one of the factors that is behind drug abuse. It is because a big number of people in society are financially dependent on the drug business, and it also includes youngsters. Some of the youngsters do sell drugs at school illegally through which female adolescents can get a hand on it easily. Participant 4 also stated

"Tobacco, marijuana, and alcohol are the most used substances among female teenagers. For example, marijuana usage among teens has surged in the United States during the previous decade. Female teenagers frequently misuse synthetic marijuana (commonly known as K2 or "spice)"

According to the participant, these drugs are the most popular ones among the female adolescents. The use of these drugs is also common because of their availability in society. Marijuana has become kind of common in parties and has attracted a large number of female adolescents towards it. It is also popular as it is affordable than other illicit drugs.

C-: Peer pressure:

Participant 1 stated that

"Experimenting is the first reason associated with drug abuse in adolescents. Peer pressure is more likely to attract adolescent girls to take drugs. Second, puberty is a stage of development associated with the risk of high depression vulnerability among adolescent girls".

According to the respondent, peer pressure is quite common at this age. Female adolescents try to achieve things that will make them look cool in their social group and in failure to achieve that they may experience depression. This depression can be a reason for drug abuse. Participant 3 stated, *"The girls are more likely to smoke and use drugs to deal with their depression and stress as a way of survival".* It is because most girls at a young age are more sensitive toward interpersonal relationships and peer pressure. Similar is mentioned in the research women are more vulnerable to drug abuse and one of the additional reasons is hormonal changes in the body which increases the already existing depression of peer pressure (Bezrutczyk & Hampton, 2021). Girls, compared to boys, reach the age of adolescence quite early, and they are more likely to be attracted to stimulants and inhalants because of the cool factor (Bezrutczyk & Hampton, 2021).

D-: Social media:

Participant 2 stated **"**In some cases, social media and tv shows have also influenced female adolescents to consume drugs**"** As social media was mentioned as one of the factors that influence female adolescents toward drug abuse, using drugs may seem cool, as portrayed in movies and television shows, and this may encourage adolescent girls to engage in binge drinking, smoking weed, and using stimulants. Similar kinds of views were shared by participant 2, as the participant sees posts on social media by different individuals showing the act of consuming drugs in female adolescents' minds. Many youngsters look up to celebrities as peers, and seeing them using stimulants and inhalants influences them to follow the same trends.

2-: Prevention strategies:

Prevention strategies that can be concluded from the answers of the participants, family-based interventions, school-based awareness campaigns, community-based interventions, and psychosocial interventions such as Cognitive behaviour therapy.

The importance of prevention at the age of adolescence has been described by Participant 3. *"During this period, the brain of adolescents is developing, which makes it malleable for change. Also, some of the brain parts are still developing, and drug prevention can effectively be performed during adolescence".* A participant explained it as the earlier the intervention is made, there are more chances of being effective and preventing female adolescents from drug abuse. If the interventions are delayed and the individual consistently abuses drugs for a long time then there is a risk of biological and mental health getting worse. Through this, it can be concluded that prevention at an early stage can have better effects on the victim of drug abuse. Delay in seeking help can also delay the results as drug abuse reaches its extreme stage. Participants explained that measures taken at that stage don't only include CBT but clinical treatments and medication become necessary.

A similar response was noted from participant 1. "Also, during this period adolescents are prone to experimentation with drugs and peer pressure, and the desire for exploration. *"Others desire new and risky behaviour during adolescence, hence the best time to control and prevent addiction is during this period".* There is also risk involved for this age group as the participant above explained that female adolescents are growing mentally, and the environment and surroundings affect their decisions. Family environment, school environment, and social groups they sit in can influence their mind and make them involve themselves in those practices that are harmful to them in the future.

System theory explains the importance of environmental factors that contribute towards hardships faced by the individual. Social reforms are also introduced in systems theory, and they are also concluded through these factors (Payne, 2014). Some of the causes mentioned earlier by the participants are related to family situations and drug availability in the society. These factors are the small systems that come together and affect the large system. These two factors are also used to create reforms in relation to drug abuse. Participants mentioned family-based interventions and community-based prevention strategies which can be validated through the

process of how system theory works. System theory mentioned about empowering and creating resilience among the individuals to fight the problems (Payne, 2014). Participant 3 mentioned Cognitive behavioural therapy that plays its role in creating both empowerment and resilience among the clients. Female adolescents spend a reasonable time at schools and can be led towards drug abuse through the trends at school. It has also been included as a part of a small system and included in themes.

Prevention strategies used by the organisations are here into four themes.

a) School-Based Prevention Strategies

b) Family-Based Interventions

c) Community Based Prevention Strategies

d) Cognitive Behavioural Therapy

A-: School-Based Interventions:

Participant 4 stated "In school, we educate them on how to avoid drugs and how to seek help in case they are already using drugs". According to participant 4 the best prevention strategy that targets female adolescents is school. Pre Covid seminars used to be held in school and members from different social work organisations used to speak and educate the students about the negative consequences of drugs. They are told who to contact if you need help in prevention and how to avoid drugs through campaigns among their social groups.

Participant 2 said, "Students are also told how to cope with stress-related issues which come from studies and family". Participant 2 later explained that female adolescents experience stress from studies, family problems, and peer pressure. Through school, it is the best way to

tell them who to reach out to when facing these kinds of problems. This helps them to make average decisions and not to make bad decisions such as consuming drugs.

Participant 1 said "There are some schools where education about drugs is already given by school administration and teachers provide them guidance", upon inquiring about teachers' roles the participant said that teachers do talk to female adolescents in person and inquire about their problems. School-based interventions are much more successful if the school staff is itself involved in it as they spend more time with students every day and they can easily identify the female adolescents who are at risk of drug abuse.

B-: Family-based Interventions:

Researchers further inquired if these factors play part in prevention. In response to that Participant, 3 stated:

"Family-based interventions can be done in individual cases and I have also been in contact with families of the victims, we advise them according to what is required, sometimes it's about more supervision, sometimes about behaviour towards children, sometimes advising them to spend more time with them". The participant further explained that if the female adolescent spends more time with parents and enjoys a healthier relationship with them there is less risk of experiencing stress. Parents are advised to keep an eye on the activities of children and spend time with them and inquire about their problems. Family problems should least affect the female adolescents and there should always be support for them from within the families if they are facing adversaries.

The role of family-based interventions was also addressed by participant 1 who said "Social workers sometimes work as a mediator but sometimes we are also required to teach them about proper parenting". Proper parenting, the participant's explanation was to teach them how to create a healthy relationship with female adolescents. Parents are given advice and monitoring and creating proper parent/ child attachment. It was pointed out that good parent-child attachment has a positive impact on the mental health of female adolescents and parents

can become a protective factor and provide resilience to female adolescence in stressful situations.

C-: Community-based Drug Preventions:

Participant 4 mentioned, "There are currently few awareness campaigns in areas where numbers of drug users are quite high, this involves media campaigns, bill boards & workshops". According to the participant, small campaigns are always present to create self-awareness among the people of the community about drugs. Advertising about the social work organisations, NGO´s and other different clinical treatments are advertised through billboards and media. Community-based prevention plans are focused on the areas with a high rate of drug abuse, but it needs a bigger solution. "We work with law enforcement institutions and community leaders but it's not enough to create a big difference" (Participant 4). According to the participant, doing workshops or organising events with the participation of community leaders (Politicians, Pastors) gives an impression that the community is united against the drug problem. Law enforcement institutions such as the police are also involved to contain the illegal supply of drugs and improve reporting of drug selling cases. According to participant 4 it is not enough as a wider approach and macro policy may be required as there is a problem with the narcotics economy. Many people earn their living through the drug business and a policy that is more focused on the integration of these groups into the legal jobs can help reduce drug abusers, specifically female adolescents.

D-: Cognitive Behavioural Therapy:

Participant 3 said "Therapeutic sessions with female adolescents facing stress and anxiety issues helps improve their mental health and the risk of them using them can be avoided or

the risk of further drug abuse can be reduced". According to the participant, females experiencing stress and anxiety do reach out for therapeutic sessions which are offered at the workplace of the participant. They do offer services regarding the treatment of stress, depression, anxiety, and other behavioural disorders. One of the reasons for drug abuse among female adolescents mentioned by participant 3 is stress, depression, and anxiety, and if these problems are addressed earlier then drug abuse can be prevented. The same is the case with female adolescents who are already involved in drug abuse. If they intervened earlier they could be stopped severely from drug addiction.

There are many who don't seek treatment for stress or drug abuse because at the early stages they don't find it as a problem. Participant 4 later said "Acceptance *is the most challenging component of assisting adolescents. For example, most adolescents are not willing to accept drug abuse problems, and as a result, this might be a challenge for treating the patients".* This becomes a challenge when the victim of drug abuse is not ready to accept herself as a victim. They do not seek help earlier in this sense by the time they seek help the treatment becomes much more complex and goes beyond therapies. It can be concluded that the treatment for stress, depression, and anxiety at an earlier stage can help prevent or reduce drug abuse.

Discussion of results in connection with previous research and theories:

The results are the information acquired from the interviews and literature and it is described through analysing by connecting information received from participants with theories and literature. A connection is developed between theories, literature, and data from the interviews to create a conclusion on the results.

The first part of the aim of the study is the causes of drug abuse and it is also the first research question. The causes explained by different participants are Dysfunctional families, availability of drugs, peer pressure, and social media. These factors have a huge impact on living and the choices a female adolescent makes in different situations. These causes are separately discussed by analysing them with research and theories.

One of the causes mentioned by participants is the dysfunctional family. According to the research, uncertainty at home affects the mental well-being of the person (Schinke et al., 2008). As in the case of young female adolescents, they face stress due to the environment at home (Schinke et al., 2008). It can be fought among parents, less attention, or financial crisis. Due to this, they do also fail in other commitments in life. This creates depression and stress, and they start using drugs as a coping mechanism. They take drugs to release stress and make them feel better. It becomes a habit when it is continued for a few months, and a person becomes a serious drug abuser. Individuals, according to system theories, adapt to their circumstances and exert pressure on them (Payne, 2014). Family problems create pressure on female adolescents, and to balance that pressure, they use drugs as a solution. Individuals attempt to accept reality rather than confront or change it (Payne, 2014).

This cause can also be compared to the unstructured environment at home mentioned in the research before. In this environment, parents do not tend to provide enough time to children and are not able to create a healthier child-parent relationship (Bezrutczyk & Hampton, 2021). Young adolescent girls try to hide their problems from parents or intentionally do not share those with them. This relationship gap leads to girls finding other attachments outside the home. It also leads to the use of drugs. In the same scenario of a dysfunctional family, parents do not tend to monitor their children and this relationship gap also leads to losing influence and control over children. In absence of monitoring from parents, they do not get to know of drug abuse among their children earlier (Schwinn M., et al 2010). Participants mentions that less attachment between parents and female adolescents is one of the risks of drug abuse. Less monitoring and inappropriate supervision of female adolescents also gives them space in those groups which are involved in consuming drugs.

Easy availability of drugs is the second cause mentioned by the participants. It is also stated that around 35% of school children in Maryland have once used drugs in their life (Schneider, et al, 2020). It can also be listed as one of the external factors as participants mentioned that the availability of drugs is a problem at society level. It relates to the drug economy which is a way of earning for many families. According to the research by Schneider, et al, (2020) trends in society are also one of the causes behind drug abuse and the trend of drugs in society is only possible when there is the easy availability of drugs. According to the participanst, trends of

drugs within society help female adolescents to easily avail drugs and consume drugs as a part of a trend as it becomes easy for them to find a friend or family member who consumes drugs. According to system theories, environmental factors do affect people's decisions (Payne, 2014). The environment of neighbourhoods and trends within the community influences individuals' minds and may lead them to take decisions such as drug abuse.

Trends in the use of drugs in society are also one of the external factors that have been already mentioned in the research (Schneider, et al. 2020). These trends do play their part in influencing people to make wrong decisions. Participants extended social media trends, which spread faster and more widely among youth as using these apps is one of the most common activities among female adolescents. Social media posts that promote drugs and show that something is cool. According to participants, youngsters do follow celebrities and stars and not every one of them is an inspiration. Some of those celebrities do also consume drugs and show it to their viewers as being a cool thing. As systems theory explains, external and internal factors are correlated through systems (Payne, 2014). Social media can also be termed as an external factor. Information received from social media can influence a single system and then create a reaction within the individual. One of the reactions can be drug abuse.

Peer pressure is also a cause of drug abuse, as concluded from the interview. According to participants, female adolescents are more likely to experience peer pressure. Many of them give in to the pressure of their friends and abuse drugs. Participants also stated that this is the age of experiencing new things and sometimes for image building and being accepted in some social groups, they tend to give up peer pressure. According to the research by Perez, (2022), peer pressure becomes a problem at the age of adolescence and when most or all of the adolescents are involved in drug abuse, it becomes difficult to resist the pressure.

Participants described it as adolescence, an age when the mind is developing and is ready to try new things. It can be easily impacted by social media, friends, family, movies, TV shows, and trends in societies. According to participants hormonal changes in a female body makes them more vulnerable to experiencing stress. According to research drugs do affect women more and they are more vulnerable to relapse and extreme cravings because of biological differences. (Bezrutczyk & Hampton, 2021).

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Second part of the aim is prevention strategies. The findings from the interviews have concluded community-based interventions, family-based preventions, school-based prevention, and Cognitive-behavioural therapy. These are below explained and analysed through theories and literature. Prevention strategies have a long history and social work organisations and social workers have been playing their part both at individual and community levels (Sussman & Ames, 2008). Social workers and organisations are well-positioned to respond to drug and substance abuse challenges in society.

School-based practices as mentioned by the participants are such as organising the seminar and educating the students about the negative aspects of drug abuse and how to prevent it. Participants also explained about educating the children about how to approach treatment and other assistance in case of stress or anxiety. Participants also focused on the effective role of the school administration in this regard. There is certain proof by the participants that this prevention provides better results as no surveys are conducted by them but according to Sussman & Ames, (2008) these do help in reducing drug abuse in schools. The research mentioned in the same literature shows that eight schools with school-based prevention programs had a low rate of consumption of drugs. The other 8 schools which received no support or had no drug control strategies had a higher rate of drug use such as alcohol & marijuana (Sussman & Ames, 2008).

The community-based intervention has also been mentioned by participant above. The participants highlighted the importance of the stakeholders such as police, community leaders, and local leaders or politicians. They are used to create self-awareness campaigns. Participants also mentioned the use of pamphlets, billboards, and advertising the advertisement by the NGOs and social working organisations for treatment and awareness purposes. This prevention strategy also reduces the risk of drug abuse as Carson et al. (2011) entailed the evaluation of the effect of coordinated community interventions in reducing smoking behaviours. In this study, the interventions involved community leaders in developing and supporting community programs, monitoring smoking prevention interventions, and training community workers. The findings indicated that community-delivered interventions effectively reduced smoking rates and increased knowledge of adverse impacts of smoking and intentions to smoke.

Both schools based and community-based prevention strategies demand long term focus and follow up. Task centred practice focuses on supportive work, provision of services and long-term planning for a social problem (Payne, 2008). Task centred practice involves training of the social workers that will help them to create a professional relationship with the society (Payne, 2008). As in the case of school-based and community-based practice a relationship that encourages the people to seek the solution towards drug abuse is necessary to solve the problem at macro level. The task centred practice does not provide overall cure but still reduces its intensity. Same is the case with drug abuse as overall eradication of drug abuse is nearly impossible through these strategies but may reduce the rate of cases of drug abuse as witnessed in research mentioned above (Sussman & Ames, 2008).

Family-based interventions have been also mentioned by participants. It is explained as providing better training to the parents to do appropriate parenting by doing effective monitoring and giving time to children and inquiring about their problems. According to the research Schinke, et al, (2008) Female adolescents who had a good attachment to their mothers showed less rate of drug abuse as they got the chance to share their problems with mothers and faced less stress when receiving support. This explains the importance of family-based intervention and how effective it is regarding drug abuse.

Task centred practice involves the sources available that can be used to intervene. One of the sources of drug abuse can be immediate family. Family can also be included in a support system as mentioned by this theory, (the systems that can help to prevent or resolve crises). Supervision and monitoring about the progress of clients is also focused on this theory (Payne, 2014). Family is in a better position to provide better supervision and monitoring as victims which are female adolescents spend a lot of time at home.

CBT is mentioned by participants as one of the prevention strategies in which the participant believes one of the reasons for drug abuse is stress, depression, and anxiety. The causes can be reduced through CBT and later reduce the risk of drug abuse. It also helps the female adolescents who are already using drugs and prevents them from further drug abuse.According to Wells et al. (2013), "Cognitive Behavioural Therapy (CBT) seeks to help people recognize the situations in which they are at risk for use, avoid these "high risk" situations, and cope effectively with

temptations, cravings, and stressors" (282). Thus, there is adequate support that CBT can be used for dealing with alcohol and drug-abusing children and female adolescents.

Task centred practice also focuses on emotional and interpersonal issues. The main instrument for these issues is CBT (Payne, 2014). The participants also mentioned CBT as the tool in handling stress and depression among individual female adolescents. CBT provides a brief treatment in most cases and it helps build a mutual relationship between professionals and clients which is necessary for any intervention to be successful (Payne, 2014). The focus of the theory is to achieve client's commitment and conventional interviewing can help achieve it (Payne, 2014). CBT includes conventional interviewing.

As previously mentioned in the finding, the sense of "acceptance" among victims. The feeling of acceptance among the victims of the act of drug abuse as criminal and harmful to an individual is necessary and participant 3 mentioned "*Acceptance is the most challenging component of assisting adolescents. For example, most adolescents are not willing to accept drug abuse problems, and as a result, this might be a challenge for treating the patients*" it helps them move toward seeking help for their benefit. According to Payne, (2014) crisis and task-centred practices are only successful when there is a willingness on the behalf of the client. If a victim in this case a female adolescent is willing to seek help and get rid of the drug abuse problem. Then it will be easy to make the client adhere to the plan and follow the instruction as the victim is already motivated and has taken the initiative herself as participant 4 later said "*Commitment, support, and adherence to the treatment plan are all those elements that are related to the recovery process*". In absence of commitment and adherence to plan the recovery of prevention from further drug abuse is not possible.

Summary and Conclusion:

The problem of drug abuse is the problem that has been focused in this study. Drug abuse is a problem not only for the individual but the whole of the society. It has consequences which expand in the community and follow the coming generations. Consequences aren't only social but biological and financial. This study focuses on drug abuse among specific group which is

female adolescents and the population that was targeted is Maryland. The Aim of the study is to investigate the cause behind drug abuse among female adolescent and the strategies used for the prevention from drug abuse in Maryland. The investigation concluded both sections of the aims. The causes identified were dysfunctional families, availability of drugs, peer pressure, and social media. Prevention strategies that were identified family-based prevention, community-based prevention, school-based prevention, and CBT. These results included information from the participants working in the field of drug treatment and prevention in Maryland, literature, previous studies, and theories.

It has been concluded that social work plays an important part in curbing down drug abuse. The places where less or no support for victims of drug abuse have high rate of drug abuse (Sussman & Ames, 2008). The environmental factors that are identified as systems influence individual and societies in different ways (Payne, 2014). These factors may play part in decreasing or increasing the drug abuse rate in the society.

Suggestions for further Research:

The focus of this study was causes and the prevention strategies of drug abuse. In this research the authors witnessed the difference among the causes explained by participants and mentioned by previous research. These were due to the difference in cultural dynamics and financial situation in different areas. Further suggestions can explore the causes and prevention strategies in places where poverty and rate of literacy is low and compare it with societies where quality of living is high. That will help us explore further factors that contribute to drug abuse among the population.

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Appendix (Interview Guide):

What is the cause of Influence Female Drug Abuse?

Are these Factors Women Specific?

Are these causes familiar in most of the parts of Maryland?

What are the Most Common Drugs Used in Maryland?

Why Adolescence is such a crucial period for drug Abuse and the best period for prevention?

What are the prevention strategies in regard to female Adolescence drug Abuse?

What is the success rate of the strategies?

What is necessary for prevention Strategies to be Successful?

What is thought to be difficult in implementing these strategies?

How successful is CBT in this regard?