The Psychology of Addictive Behaviour Summary

Vulnerability to addiction

Risk Factors in the development of addiction:

Age:

Outline:

Adolescence is prime time for initiation of dependency behaviours such as smoking.

• Positive correlation between early onset of dependency behaviours and reduced probability of abstaining

• 17.3% of adolescents from 132 countries were classed as smokers in 2006

• Those who start their addictions early are also more likely to relapse when trying to quit

• Early onset is also related to increased likelihood of other dependency behaviours – they act as ‘gateway’ behaviours to other dependencies
  o Suggests that early experiences of dependency substances and behaviours is highly correlated with later dependency, failure to quit and relapse

• Increased vulnerability to addictions in old age/ after retirement possibly due to the change in lifestyle or stresses like death of a loved one or boredom

Research:

Fidler et al (2006):

> Assessed smoking habits of 5,863 adolescents aged 11-16 by taking saliva samples to measure nicotine levels

Found:

Those who had smoked by age 11 were twice as likely to be a regular smoker at 14 as those who hadn’t.

Those who became smoking addicts were far more likely to have tried smoking at an early age

>> Suggests that there is a ‘sleeper effect’ where early experiences of smoking cause a dormant vulnerability that can take years to express itself

This may be due to biological factors, such as early onset smoking affecting brain structures associated with reward and addiction, or because of social factors, such as individuals identifying themselves as smokers form an early age. Could be a combination of several factors.

+ objective/scientific measure: saliva samples, supports psychology as a science

Health Canada Youth Smoking Survey (2006):

> Compared smokers who initiated dependency between 12-15 years of age with non-smokers

Found:

Early onset smokers were more likely to drink alcohol (91% compared to 52%), binge drink (58% compared to 23%) and smoke cannabis (50% compared to 5%)

>> Implies that adolescent smoking is a ‘gateway’ facilitating progression to other legal and illegal drug use

Evaluation:

> Research shows that public health initiatives would be more effective if they targeted a specific age group (e.g. adolescents who are most vulnerable to addiction – opposing experimentation with tobacco or providing alternative activities by governments for young/old to ensure added enjoyment in life to prevent addictions)

> Social desirability bias – elderly people much less likely to admit dependency than youths due to it being a taboo subject. This has implications for treatment as younger people may feel more able to admit to addictions and therefore seek help/treatment whilst elderly dependents may go un-noticed

> Media suggests that dependency is more of an issue for younger age groups, however, the older generations are just as vulnerable – this issue needs to be addressed to provide equal attention to both age groups
Other PHIs could include: negative advertising campaigns that aim to deter people from maintaining or engaging with addictive activities by highlighting the negative consequences of engaging in these behaviours also website advice

General Evaluation of PHIs:
- Identifying risk groups can be cost-effective as it targets resources at those who might benefit from them most
- Assessing the effectiveness of PHIs is important as it helps to ensure that funding can be used more wisely on those that will be the most effective - perhaps the most cost effective way is focussing on preventative methods as this will reduce costs in the long run of healthcare
- However, assessing their effectiveness can be very difficult because it is hard to assess how much involvement a PHI has in helping individuals avoid/reduce addictive behaviours compared to the influence of other factors such as level of free will/intervention from friends and family
- The most successful PHIs seem to be those based on models of behaviour like TPB which aim to change people’s intentions and thoughts about a behaviour as a preventative measure