ABSTRACT to be submitted to the Society for Adolescent Medicine (2010)

Title: RESIDENTS’ ATTITUDES TOWARD CLINICAL MANAGEMENT OF SUBSTANCE USE

Purpose: Use of alcohol, tobacco, and other illicit substances begins in adolescence and peaks in young adulthood. Because 80% percent of adolescents and young adults have at least one outpatient clinical encounter each year, Pediatricians and Family Physicians are uniquely poised to screen for and manage adolescent substance use issues. In this study we examine pediatric and family medicine residents’ attitudes toward the clinical management of substance use.

Methods: In the spring of 2009, 71 pediatric and family medicine residents at our institution completed confidential self-administered questionnaires. The mean age of the participants was 31.4 years, 62% were pediatric residents, 61% were residents of color (34% Latino, 26% Asian, 1% African-American), 39% were non-Latino white, and 75% were female. The outcome variables examined were current practice, self-efficacy, readiness to change, belief in treatment, and optimistic attitude toward treatment. T-tests and multivariate backward stepwise linear regression analyses were conducted.

Results: T-tests demonstrated that family medicine residents (p<.004) and residents of color (p<.038) each had significantly higher scores on 3 of the 5 outcome variables. In the multivariate analysis, specialty and race persisted as significant predictors after controlling for other potential predictors such as personally knowing a person with a substance use issue, previous training, clinical exposure, and previous clinical experience. Family medicine residents reported higher levels of currently managing substance use, greater self-efficacy, and greater readiness to increase their management of substance use. Residents of color reported greater readiness to increase their management of substance use, greater belief in treatment, and a more optimistic attitude that treatment would be successful.

Conclusions: While teaching future physicians to address adolescent substance use issues, residency programs should increase their understanding of and tailor educational interventions to address potential specialty and racial differences among trainees.

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