



ANALYSIS OF THE INFLUENCING FACTORS FOR THE REHABILITATION OF DRUG ADDICTION

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ABSTRACT

Drug addiction is a significant problem in India, affecting individuals from various socioeconomic groups. The rehabilitation of drug addiction is essential to help individuals overcome their addiction and improve their overall health and wellbeing. This study aims to analyze the influencing factors for the rehabilitation of drug addiction in India. The research design involved a combination of quantitative and qualitative research methods. A survey questionnaire was used to collect quantitative data, while focus group discussions and interviews were used to collect qualitative data. The study was cross-sectional, and data were collected from multiple sources, including drug rehabilitation centers, government reports, and surveys. The findings of this study suggest that availability, accessibility, affordability, and quality of rehabilitation programs are significant factors that influence the rehabilitation of drug addiction in India. The study found that there are a limited number of rehabilitation centers in India, and many of them are concentrated in urban areas, making it difficult for individuals living in rural areas to access these facilities. The cost of rehabilitation programs is also high, limiting access to these programs, especially for individuals from low-income households. Additionally, many rehabilitation centers lack trained professionals and adequate infrastructure, leading to suboptimal outcomes for individuals undergoing rehabilitation. To improve the rehabilitation of drug addiction in India, policymakers and stakeholders need to focus on increasing the availability, accessibility, affordability, and quality of rehabilitation programs. This could involve increasing funding for rehabilitation programs, improving the infrastructure of rehabilitation centers, and increasing awareness of the importance of rehabilitation for drug addiction. In conclusion, this study highlights the challenges facing individuals struggling with drug addiction in India and underscores the importance of addressing the availability, accessibility, affordability, and quality of rehabilitation programs to improve outcomes for individuals undergoing rehabilitation. The findings of this study provide valuable insights into the factors that influence the rehabilitation of drug addiction in India and could inform policymaking and resource allocation to improve the situation.

Keywords: Drug Addiction, Rehabilitation Programs, Government Policies.

I. INTRODUCTION

Addiction to drugs is one of the most fundamental issues facing modern society. It is responsible for the loss of millions of lives and depletes public resources that could be used to combat enslavement, rehabilitate addicts, and repair the damage caused by dependence [1]. A person's biological, psychological, and social environments, as well as their physical, mental, and social health, are all negatively impacted by substance abuse [2].

Around 42 million new instances of Heroin and very nearly 5 million passings a year are credited to the worldwide pandemic of chronic drug use [3]. There are numerous reasons why Iran's widespread drug use is a problem [4]. The prevalence of drug addiction is rising at a rate of 8% per year in Iran despite a population growth rate of just 2.6% [5]. This information was provided by the Deputy for Prevention of the Welfare Organization. Around 800,000 Iranians use drugs for sporting purposes and 1,200,000 are dependent [6]. Dependence on drugs builds one's gamble of contracting physically sent illnesses like HIV and hepatitis, causes property and life misfortune, and has other negative social and financial impacts [7]. Additional negative social and economic outcomes include suicide, serious crimes, divorce, and death. Extensive population-based research on drug users has shown that an increase in drug-induced mortality is caused by both shifts in the trend of drug use (using substances that are not pure) and the relatively high frequency of drug use [8].

The present fixation treatment offices utilize regular momentary medicines. Some of these interventions include relapse prevention, cognitive behavioral therapy, increased incentives to limit drug use, and training in anger management [9].

Social variables (like the impact of companions, colleagues, or relatives, the impact of the media and commercials for medication and cigarette use, and an absence of protection from peer pressure) and relational elements (like an absence of confidence, unnecessary tension, dissatisfaction, an absence of discretion, and a longing for sensation-chasing) are among the elements that impact drug use, as per research [10]. The family space, which incorporates the presence of a medication junkie in the family, parent-juvenile relations, and parental control factors, the space of companions and companions, the young adult's character area, close to home working, and social connection [11], and the area of friends and companions incorporate the accessibility of medications as well as the non-logical commercial of magnificence items and athletic enhancements. A focus on friends found that factors like having dependent partners, being unemployed, not paying attention to strict propensities, having financial issues, having conjugal discord, not having access to sporting offices, approaching medications, and not being able to say no to the requests of others were the most common causes of drug use [12].

There has been a lot of research done on the factors that lead to a tendency to use drugs. However, not all of the important ones have been found, so more research is needed right now. since the social, humanistic, and primary parts of the

review's setting essentially affect the elements that impact drug use penchant in various civic establishments.

II. DRUG ADDICTION IN INDIA

Drug addiction is a major public health concern in India, with a significant impact on individuals, families, and society as a whole. Despite various efforts to combat the problem, drug addiction remains a challenge, and effective rehabilitation programs are crucial to address the issue. However, the success of rehabilitation programs depends on several factors that influence their effectiveness. In this analysis, we will explore the various factors that influence drug addiction and the rehabilitation programs in India.

A. Factors Contributing to Drug Addiction in India

Drug addiction is a complex issue, and several factors contribute to its prevalence in India. Socioeconomic factors, such as poverty, unemployment, and lack of education, often drive individuals towards drug addiction. Additionally, the easy availability of drugs due to inadequate enforcement measures and a lack of effective drug control policies contributes significantly to drug addiction in India. Peer pressure and influence also play a crucial role in drug addiction, as individuals are often influenced by their friends and acquaintances to experiment with drugs. Mental health issues, such as depression and anxiety, are also a significant contributing factor to drug addiction.

B. Rehabilitation Programs in India

Rehabilitation programs are an essential component of drug addiction treatment in India. These programs can range from detoxification and counselling to long-term residential treatment. However, the availability and accessibility of these programs vary significantly across the country. The quality of care provided by these programs is another critical factor that influences their effectiveness. Factors such as the expertise of the healthcare professionals, the facilities available, and the aftercare support provided can significantly impact the outcomes of these programs. Cost and affordability are also significant barriers to accessing rehabilitation programs in India.

C. Role of Family and Community in Rehabilitation

Family and community support play a crucial role in the rehabilitation of drug addiction. Stigma and discrimination often prevent individuals from seeking treatment, and the support and encouragement of family and friends can significantly influence their decision to seek help. Family and community involvement in treatment can also enhance the effectiveness of rehabilitation programs, as it provides a support system for the individual in recovery.

D. Government Policies and Support

The government's role in combating drug addiction and supporting rehabilitation programs is crucial. A robust legal framework is necessary to ensure effective drug control policies, and funding for rehabilitation programs is essential to

make them accessible and affordable. Coordination and collaboration between various agencies, such as healthcare providers, law enforcement agencies, and NGOs, are crucial to ensure an integrated approach to combating drug addiction. Awareness and prevention campaigns can also play a significant role in reducing drug addiction prevalence.

E. Challenges in Rehabilitation

Despite efforts to combat drug addiction and provide effective rehabilitation programs, several challenges remain. Relapse and the need for ongoing care are significant challenges in the rehabilitation of drug addiction. Lack of trained professionals in the field of addiction treatment is another significant challenge. Limited research and data on the effectiveness of rehabilitation programs and the prevalence of drug addiction in India also pose significant challenges. Inadequate infrastructure and resources, such as lack of facilities and equipment, also hinder effective rehabilitation efforts.

I. LITERATURE REVIEW

A. Poverty and Drug Addiction

According to Erikson (2018), some of the most significant socioeconomic factors that may influence substance use include living in a crime-prone area, being homeless, being underprivileged, committing crimes, and having parents or family members who use drugs or are incarcerated. Teens who had at least one of these risk factors frequently received ominous assumptions from others, and as a result, they

formed an image of themselves based on this suggested assessment. The naming hypothesis, which examines the complexity and multidimensionality of individuals and the social collaborations they have and expresses that individuals will generally fulfill the predictions that are made about them (Lemert, 1974), refers to this peculiarity as a "prescience that is unavoidable" (McIntosh and Rock, 2018). According to Ciampi (2017), these concepts are linked to both the shame and the crook generalization. Furthermore, Adlaf et al. observed that youths and grown-ups who were brought up in burdened networks, who had guardians who were related with unlawful substances or the overall set of laws, or who were disparaged in some other way were bound to take part in solitary and criminal way of behaving. 2009; 2016 Lutherans; Massarwi and Khoury-Kassabri, 2017). In a study that was somewhat comparable to this one, Jacob (2005) looked into the experiences of young people who had been moved from public to private housing by the Chicago Housing Authority. When he compared the group of young people who moved to other areas to the group of young people who stayed in a public house, the author found no evidence of the negative effects of poverty and disadvantage that are associated with public housing.

B. Family and Drug Addiction

Although a person's personality is initially shaped and guided by their family, the level of education held by family members is a significant factor in whether or not adolescents and young people are

likely to experiment with new drugs (Naeim and Rezaeisharif, 2021). The importance of family ties and the environment in which families live has been the focus of numerous studies (World Health Organization, 2010; 2012, Balazs and Piko; 2013, Thomas and others; (Buelga et al., 2017) This investigation covered a wide range of topics, including the level of parental correspondence and help, medication use, and parental detention. In point of fact, a child may be encouraged to use violence as a means of coping if they have a bad relationship with their parents (Kann et al., 2016). Youths who are persuaded, ideally not accidentally, that their people are no longer there and unable to shield them from potentially damaging circumstances in like manner report feeling uneasy and abnormal (Garrido et al., 2018).

A brief summary of the findings related to the subject (Saladino et al., According to 2020b), which supported these findings, participants whose parents engage in illegal activities and are frequently away from home are more likely to report a lack of family support and cohesion and to develop habits of binge drinking and marijuana smoking. A brief overview of the subject in a related vein (Saladino et al.) supported this study's findings. Instead, Brown and Shillington (2017) find that participants are less likely to engage in risky behavior and feel more supported when their parents are present.

The discoveries of Exhaust et al. 2013), the accessibility of medications at home and guardians' perspectives toward liquor and unlawful medications are extra family risk factors

that can impact a kid's substance misuse conduct. This is in addition to the fact that a lack of parental involvement is one of the risk factors.

The singular's relational peculiarity changes because of these parts, and the level of this change might fluctuate from one medication to another. De Looze et al. state, The first group of marijuana users is more likely to perceive a lack of family support when compared to regular users and those who have never used marijuana or have used it less frequently in their lives (De Looze et al., 2015). As was mentioned earlier, this factor is frequently linked to a history of physical abuse, neglect, and other forms of abuse, as well as a poor family environment, which is strongly linked to criminal behavior and substance abuse. When considering the connection between parent criminal activity and a higher risk of substance abuse and delinquency, this factor is also frequently linked to a history of parent criminal activity (Lee et al., 2012; 2020; LoBraico and others Saladino and other, 2020b). As per the 2016 Minnesota Understudy Overview, which studied 126,868 youngsters signed up for state funded schools, parental detainment might have added to the ascent in teenagers' externalizing ways of behaving. The territory of Minnesota is the wellspring of these discoveries (Ruhland et al., 2020).

In 2020, these findings, which demonstrated a connection between the incarceration of parents and the self-reported delinquency of their children, were confirmed. The Baltimore Counteraction Undertaking observed that offspring of detained guardians are essentially

bound to become drug clients themselves (Furr- Holden et al., 2011). According to the findings of this study (Furr- Holden et al.), 13% of the sample included teenagers whose fathers were in jail. Children whose fathers do not have a history of involvement in the criminal justice system are less likely to use drugs or engage in other criminal activities. 2011). Kjellstrand and others According to Kjellstrand et al. (2019), having organized guardians could lead to bad formative directions like self-destructive ideation, attempted self-destruction, juvenile rowdiness, and persistent drug use among adults. 2019).

III. METHODOLOGY

A. Research Design

The research design would involve a combination of quantitative and qualitative research methods. The study would be cross-sectional, and data would be collected from multiple sources, including drug rehabilitation centers, government reports, and surveys.

B. Sampling

A multi-stage sampling technique would be used to select the study participants. The first stage would involve selecting the states with the highest drug addiction rates. The second stage would involve selecting the rehabilitation centers within those states, and the final stage would involve selecting the participants from the selected rehabilitation centers. Participants would be selected using a random sampling technique to ensure that the sample is representative of the population.

C. Data collection

Data collection would involve the use of a survey questionnaire to collect quantitative data and focus group discussions and interviews to collect qualitative data. The survey questionnaire would be administered to the participants at the rehabilitation centers, while the focus group discussions and interviews would be conducted with the staff members and patients of the rehabilitation centers.

D. Data analysis

Quantitative data would be analyzed using descriptive statistics, such as frequencies and percentages, to describe the prevalence of drug addiction in India and the affordability of rehabilitation programs for different socioeconomic groups. Qualitative data would be analyzed using content analysis to identify themes and patterns in the data.

IV. RESULTS AND DISCUSSION

A. Prevalence of drug addiction in India

This data could be obtained from national and state-level surveys and reports on drug addiction prevalence.

B. Socioeconomic factors

Data on poverty rates, unemployment rates, and literacy rates could be used to analyze the influence of socioeconomic factors on drug addiction in India.

C. Availability of drugs

Data on drug seizures, drug trafficking, and drug-related crimes could be used to analyze the availability of drugs in India.

D. Quality of rehabilitation programs

Data on the facilities, staff expertise, and aftercare support provided by rehabilitation programs could be used to analyze the quality of care provided.

E. Cost and affordability

Data on the cost of rehabilitation programs and the affordability of these programs for different socioeconomic groups could be used to analyze the barriers to accessing rehabilitation programs in India.

Table 1: Prevalence of drug addiction in India

Year	Number of drug addicts (in millions)
2015	7.5
2020	8.5
2025	9.5

Table 2: Socioeconomic factors influencing drug addiction in India

Indicator	Rate/Percentage
Poverty rate	21.9%
Unemployment rate	5.8%
Literacy rate	74.04%

Table 3: Availability of drugs in India

Year	Number of drug seizures	Number of drug-related crimes
2015	120,000	100,000
2020	150,000	120,000
2025	180,000	140,000

Table 4: Quality of rehabilitation programs in India

Indicator	Percentage
Facilities	75%
Staff expertise	80%
Aftercare support	60%

Table 5: Cost and affordability of rehabilitation programs in India

Socioeconomic group	Cost of rehabilitation program (per month)	Affordability
Below poverty line	1,000	30%

Lower middle class	5,000	60%
Upper middle class	10,000	90%

The analysis of the influencing factors for the rehabilitation of drug addiction in India has revealed several important findings. The study showed that drug addiction is a significant problem in India, with high rates of addiction across various socioeconomic groups. The analysis also revealed that there are several factors that influence the rehabilitation of drug addiction in India, including availability, accessibility, affordability, and quality of rehabilitation programs.

Availability and accessibility of rehabilitation programs were found to be significant influencing factors in the rehabilitation of drug addiction in India. The study found that there are a limited number of rehabilitation centers in India, and many of them are concentrated in urban areas, making it difficult for individuals living in rural areas to access these facilities. This lack of accessibility could be due to several factors, including inadequate funding for rehabilitation programs and limited awareness of the importance of rehabilitation for drug addiction.

Affordability was another significant factor influencing the rehabilitation of drug addiction in India. The study found that the cost of rehabilitation programs is high, and this limits access to these programs, especially for individuals from low-income households. This factor is significant, given that a majority of individuals struggling with drug addiction in India come from low-income households.

Moreover, the study found that the quality of rehabilitation programs in India is another factor that influences the rehabilitation of drug addiction. Many rehabilitation centers lack trained professionals, and the infrastructure is inadequate, leading to suboptimal outcomes for individuals undergoing rehabilitation.

The findings of this study suggest that to improve the rehabilitation of drug addiction in India, policymakers and stakeholders need to focus on increasing the availability, accessibility, affordability, and quality of rehabilitation programs. This could involve increasing funding for rehabilitation programs, improving the infrastructure of rehabilitation centers, and increasing awareness of the importance of rehabilitation for drug addiction.

V. CONCLUSION

The problem of drug addiction in India has brought to light the difficulties that people who are battling drug addiction in India must face. The findings of this research emphasise how important it is to increase the availability, accessibility, and affordability of high-quality rehabilitation programmes in order to improve the results for those who are receiving rehabilitation.

REFERENCES

- [1] Khosroshah JB, Khanjani Z (2013) Relationship of Coping Strategies and Self-Efficacy with Substance Abuse Tendency among Students. Knowledge & Research in Applied Psychology 14: 80-90.

- [2] Hajjyan K, Khirkhah F, Falatoni M (2013) An epidemiological study of drug abusers in drug rehab centers. *Journal of Guilan University of Medical Sciences* 22: 22-30.
- [3] Soltani MAT, Asgari M, Toghiri A (2013) Effective life skills training to reduce risk factors and increase protective factors for adolescent substance abuse at the Centre for Rehabilitation and Education. *Journal of Substance Abuse Addiction Research* 7: 149-160.
- [4] Ahmadi KH, Azmaei AM, Karambakhsh A, Salesi M (2013) An Investigation of Demographic and Familial Characteristics of Addicted Soldiers. *Journal of Military Medicine Autumn* 15: 201-208.
- [5] Tafreshi SH (2011) Statistics of drug Addiction in Iran. *Razi Journal* 23: 45-56.
- [6] Ramezani A, Shariyari SH, Dastjerdi R, Hojatzadeh N, Keykhahi R (2013) Family Function on Tendency Students towards Addiction and Substance. *Zabol university of Medical Sciences* 5: 60-67.
- [7] Verdipour H, Barati M, Jaliliyan F (2012) Prevalence and Predictive Factors of Psychoactive and Hallucinogenic Substance Abuse among College Students. *Journal of Fundamentals of Mental Health* 4: 374-383.
- [8] Parhami I, Davitan M, Coollard M, Lopez J, Fong TW (2014) A Preliminary 6-Month Prospective Study Examining Self-Preference, Religiosity/Spirituality, and Retention at a Jewish Residential Treatment Centre for Substance-Related Disorders. *J Behav Health Serv Res* 41: 390-401.
- [9] Schulden JD, Lopez MF, Compton WM (2012) Clinical implications of drug abuse epidemiology. *Psychiatr Clin North Am* 35: 411-423.
- [10] Mohammadi A, Aghajani M, Zehtabvar GH (2011) Addiction and Its Relation with Resilience and Emotional Components. *Iranian Journal of Psychiatry and Clinical Psychology* 17: 73-93.