

Evaluation of the Tendency to Relapse for the Patient with Substance Use Disorder at De-Addiction Centers

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Abstract

Objectives: The study aims to assessment of the tendency to relapse in a patient with a substance use disorder in drug addiction center.

Methods: A correlation study design was used to conduct a questionnaire survey at two drug rehabilitation centers in Iraq. Participants 15 years of age or older showed signs of mental stability and had been diagnosed with a substance use disorder. Two tools were used for data collection a demographic data questionnaire created by researchers, a time-to-relapse questionnaire containing 20 items, and a time-to-relapse questionnaire with a Cronbach's alpha of 89.5. Statistical analysis was conducted in IBM SPSS 20.0 using whole numbers and percentages, while mean and standard deviation were used to define continuous variables.

Results: The results indicate most patients with substance use disorder are males with an average age of 26 years old, (47.1%) are unmarried, (44.3%) are married, and (38.6%) are in primary school graduation, (50%) working free work, (24.3%) are retired, and (57.2%) with a low monthly income. (44.33%) started to use the substance with the age group of 19-less than 26 years, (72.9%) admitted one admission, (64.3%) used mainly amphetamines (crystal), (51.4%) had one relapse, (54.3%) of patients associated with moderate tendency to relapse. The findings indicate reasonable direction among all scale items except items 3 and 9, which show low. No significant relationship has been reported with the tendency to relapse concerning patients' sociodemographic characteristics.

Conclusions: We find that most addicts are men; Crystal is the most used substance among young men, with moderate tendency.

Recommendations: We recommend spreading the culture of treating addiction cases by opening exceptional hospitals, developing a policy to address and reduce this phenomenon, and activating the role of the media in combating drugs. These measures will involve relevant institutions and joint committees to facilitate cooperation.

Key-wards: Tendency to relapse, Substance use disorder, De-Addiction Centers

Introduction

Relapse is defined as a resumption of substance use after abstinence has been maintained for an extended length of time or a decrease in sobriety to levels similar to those seen before treatment (Al-Hemiary et al., 2015; Rahman et al., 2016; Swanepoel et al., 2016). Substance abuse following detox and treatment is a worldwide concern, especially in low and middle-income countries (LMICs), where it persists at higher rates than in high-income nations. Substance use disorders (SUDs) are characterized by maladaptive patterns of substance use that result in clinically

significant impairment or distress (Jalil & Jabbar, 2020; Sliedrecht et al., 2019), as stated in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5). According to recent substantial epidemiological studies, substance use following successful treatment and recovery is the primary concern that needs solid preventative measures. Relapse rates for people with SUD are above 50% (Chetty, 2013; Hasin et al., 2013). Relapse rates after therapy are relatively high (Al-Hemiary et al., 2015; Chetty, 2013; Moradinazar et al., 2020), with some studies finding them as high as 75% in the 3-month to

the 6-month post-treatment period (Al-Hemiery, Al-Diwan, et al., 2017; Sapkota et al., 2016). After 2003, the drug abuse epidemic in Iraq grew, especially among young people. This was due to a number of factors, including a lack of strong religious beliefs, increased domestic violence, and a lack of confidence in this age group's future. Other factors included a lack of effective law and security enforcement, inadequate inspection and control procedures, and weak social, psychological, and economic factors (Al-Hemiery, Al-Diwan, et al., 2017; Albadry, 2022). "The southern areas of the governorate are the most active in promoting narcotic drugs, and crystal meth (methamphetamine) makes up 90% of the substances trafficked there." Benzhexol, benzodiazepines, and codeine were the drugs most regularly reported in earlier reports regarding drug usage in Iraq, which showed that prescription pharmaceuticals were the ones that were most commonly misused (Al-Gburi et al., 2020; Al-Hemiery, Dabbagh, et al., 2017; Scoppetta et al., 2021).

Methods

Design

A correlation study design was used to conduct a questionnaire survey in two drug rehabilitation centers in Iraq. Participants had to be 15 or older, show signs of mental stability, and have been diagnosed with a substance use disorder (SUD) during the previous 12 months by licensed psychiatrists. The exam was 15 minutes long and a handbook with a questionnaire was

distributed to 100. A total of 70 complete questionnaires were returned for analysis, with a response rate of 70%. The Ethics Review Board of the College of Nursing at the University of Baghdad approved the research plan and each participant gave their consent after being told what was happening.

Study Instrument

Three tools were used for data collection in this study:

- 1) A demographic data questionnaire created for this study by researchers obtained information about the elderly sociodemographic characteristics.
- 2) Time to Relapse Questionnaire: Which consists of 20 items. Cronbach- α was found as 89.5

Data Collection

The researcher interviewed the participants (addicted patients), explained the instructions, answered their questions, persuaded them to join, and thanked them for their help. Individual bases were utilized for the interview procedures, and each interview lasted 15–20 minutes after the steps that must be included in the study design were taken.

Statistical Analysis

All of the subsequent analyses were conducted in IBM SPSS 20.0. In order to classify the variables, we employed whole numbers and percentages (No. and %), while the mean and standard deviation were used to define the continuous variables (mean and SD). The correlational analysis was conducted to determine the link between the different factors. Two-tailed p.05 was used as the threshold for statistical significance.

Results

Table (1): Socio-Demographic Characteristics

List	Characteristics		f	%
1	Gender	Male	70	100
		Female	0	0
		Total	70	100
2	Age (Year)	Less than 20	9	12.9

	M±SD= 26 ± 7	20 – less than 30	42	60
		30 – less than 40	14	20
		40 and more	5	7.1
		Total	70	100
3	Marital status	Unmarried	33	47.1
		Married	31	44.3
		Divorced	4	5.7
		Widower	2	2.9
		Total	70	100
List	Characteristics		f	%
4	Level of education	Doesn't read and write	7	10
		Read and write	18	25.7
		Primary school	27	38.6
		Intermediate school	14	20
		Preparatory school	3	4.3
		Diploma/ Bachelor	1	1.4
		Postgraduate	0	0
		Total	70	100
5	Occupation	Employee	10	14.3
		Free works	35	50
		Student	6	8.6
		Retired	17	24.3
		Jobless	2	2.9
		Total	70	100
6	Monthly income (Iraqi Dinars)	Less than 300000	40	57.2
		300000 – 600000	20	28.6
		601000 – 900000	5	7.1
		901000 – 1200000	0	0
		1201000 – 1500000	4	5.7
		1501000 and more	1	1.4
		Total	70	100

Finding in table (1) shows that all patients are males (100%) with average age 26±7 years old in which 60% of them seen with age group of “20-less than 30 years”. The marital status refers that 47.1% of patients are still unmarried while 44.3% of them are married. Regarding

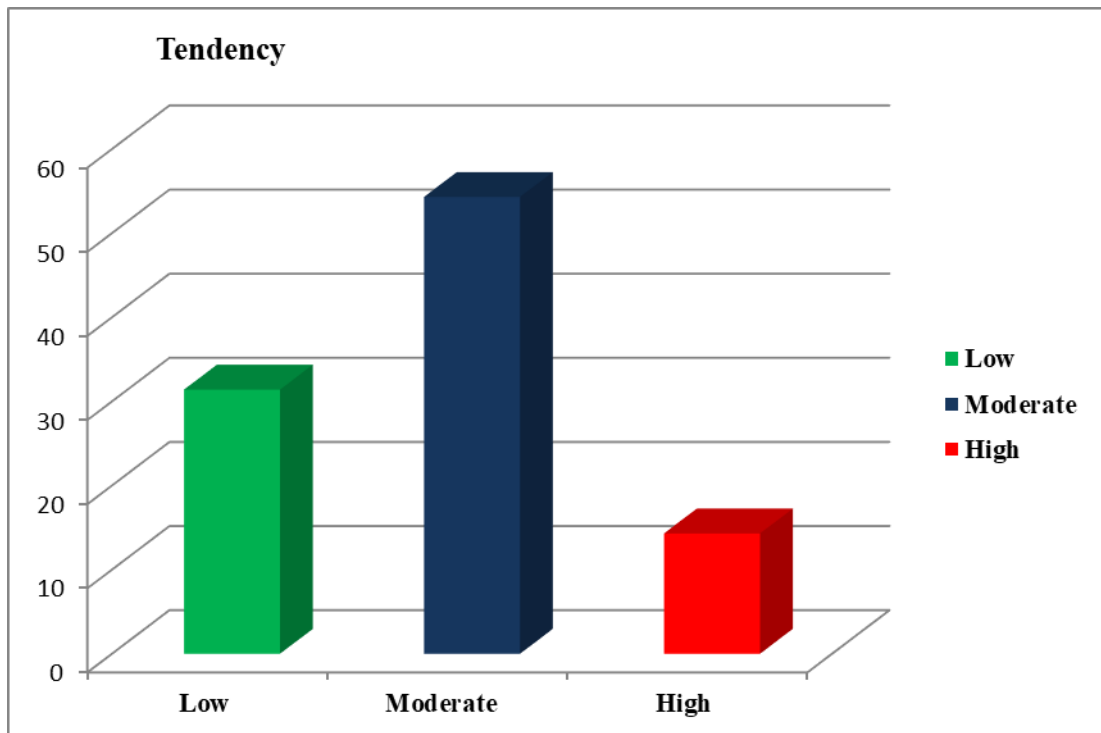
level of education, the highest percentage refers to “primary school graduation” among 38.6% of patients. The occupational status indicates that 50% of patients are working free works and 24.3% of them are retired

Table (2): Overall Evaluation of Tendency to relapse among patients with Substance Use Disorder

Variables	Rating	No.	%	M (\pm SD)
Tendency to relapse	Low	22	31.4	38.33 \pm 6.145
	Moderate	38	54.3	
	High	10	14.3	

This table manifests that patients show moderate tendency to relapse as reported by 54.3% of them ($M \pm SD = 38.33 \pm 6.145$).

Figure (4-1): Tendency to relapse among patients with Substance Use Disorder (N=70)



This figure shows that 54.3% of patients associated with moderate tendency to relapse.

Discussion

This study investigated substance abuse patients' prevalence and relapse risk factors at De-Addiction Centers in Baghdad and Thi Qar. The participants in this part of the study were 70 patients from addiction treatment institutions in the governorates of Baghdad and Thi-Qar, which comprised the study's sample.

According to the findings (Table 1), all patients enrolled in treatment programs were men (100%) because no facilities are dedicated to treating women's addiction. The findings in this study are consistent with numerous other studies showing that men are more likely than women to abuse substances (Roberts, 2017; Tshitangano & Tosin, 2016). Females' relatively low

rates of substance abuse may be attributable to several variables. These may include social stigma, cultural beliefs, and the greater ease with which male students can obtain and use drugs (Al-Hemiary et al., 2014; Heydari et al., 2015).

Regarding the study subjects' age, the present study shows that the average age (26 ± 7) years old in which 60% of them seen with age group of "20-less than 30 years". This study supports the common belief that drug use hurts the effectiveness of the youngest and most productive age group. Many studies revealed similar results (Din et al., 2019; Khalifa, 2016; RAGHUVANSHI et al., 2022), whereas others

reported different results (Cooper, 2013; Prajapati et al., 2019; Randhawa et al., 2020).

Concerning the study subjects' marital status, the majority of the sample is unmarried (47.1%), which may point to a higher rate of substance abuse among the single population due to a lack of social support. The death of a loved one is one reason why people might use drugs and can be seen as a risk factor for becoming addicted. These findings are consistent with those of other researchers (Hooper et al., 2011; Kiburi et al., 2018).

In terms of the study sample's level of education, the highest percentage refers to "primary school graduation", and 50% of the study sample are free works. This finding disagrees with some results from Rather et al. (2015), who found that 53.5% of patients had a high school education. Approximately 46.5 percent of patients are semiskilled occupation patients. According to the findings, a fatherless individual is at a significantly higher risk of relapsing after receiving therapy than a parent.

Research shows that parents should be actively involved in their children's treatment, which may even include receiving treatment themselves (K Khudhiar & A Hussein, 2012; McPherson et al., 2017). In reality, according to surveys conducted by rehabilitation centers, parents frequently initiate treatment for their minor or adult offspring. Drug addiction is so debilitating that not even the most determined person can overcome it without assistance. Thus, parents of patients with SUD must take the initiative to seek health care for their children. Yet being a parent entails more than ensuring that their child with substance use disorder attends treatment.

Many studies have shown that children who grow up without father figures or who have a strained relationship with either parent are likelier to act independently and disobey their mother's orders. For

young persons with SUD, this can result in relapse following treatment due to inadequate family support and lack of follow-up (Adinoff et al., 2010; Hussein & Mohammed, 2022; Menon & Kandasamy, 2018).

Those who used two or more substances were found to have a higher risk of recurrence than those who used only one. These findings complemented the earlier research (Al-Hemiary et al., 2015; Andersson et al., 2019; Merz, 2018). Those who reported using four or more substances were statistically insignificant. However, this may have been due to the small sample size. Previous research corroborates our findings, showing that single-substance exposure leads to more extended periods of sobriety than multiple-substance consumption (Bhandari et al., 2015; Khalifa, 2022; Muslim & Ajil, 2022). Researchers also discovered a link between one's the social circle and relapse. Because of the potential diversity of settings in which friendships and social networks operate, peer influence is a complex problem to tackle. Many researchers have examined the impact of social networks, or peer groups, on the likelihood of relapsing into substance use disorders.

Previous research indicated that 50% of former patients with SUD were persuaded to resume drug use by old companions after leaving recovery centers (Hasin et al., 2013; Khalifa, 2016). According to the same author, 76% of former drug users report assisting rehabilitated friends in obtaining drugs. It was shown that after receiving treatment, the patient's social environment might either facilitate or impede their efforts to alter their behavior. The development of substance use behavior and the encouragement of relapse have been linked to "negative peer influences" (Adnan & Rashak, 2020; Hasan & Mohammed, 2022; Sapkota et al., 2016). Patients could not resist either direct or indirect attempts to engage them in drinking, as found by similar authors. Patients have difficulty staying clean because the drug is socially acceptable

for recreational use (Ali, 2021; San et al., 2013). This study's findings showed that Patient with substance use disorders from households with substance abuse problems were more likely to relapse to drug or alcohol use than those from families without such issues. These findings also indicated that parental disagreements, a lack of parenting expertise, and an ineffective monitoring strategy might all be reinforced within family conflicts. Previous research corroborated these findings, showing that peer pressure and spousal violence increase the likelihood of relapse to substance use among those with SUD (Okab & Ahmed, 2022; Swanepoel et al., 2016; Yasir & Hassan, 2021).

The results also showed that risk factors for relapse following treatment included not living with just the mother. Hospitalization for one to three months using two to three substances Peer pressure. Drug accessibility. Family and social issues such as family conflicts These findings support previous studies that found that lack of self-confidence, peer pressure, the inability to give up old habits, easy access to drugs, a lack of family and social acceptance, and family and social adjustment problems are the leading causes of relapse after treatment (Degenhardt et al., 2018; Mohammed & Bakey, 2021; Moos, 2011).

Conclusion

Most addicts are men, with the crystal being the most used substance. There was a high relapse rate after treatment for SUD, and some of the risk factors found were family problems, mental stress, peer pressure, and socioeconomic statuses, such as easy access to drugs, peer pressure, and a lack of assertiveness. So, managing drug use shouldn't be limited to just detoxing. Instead, long-term follow-up should be emphasized to prevent relapse.

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