

REHABILITATED AND RELAPSED ADDICTS

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ABSTRACT: *A Comparison of the Characteristics, drug habits and drugs of use of 50 rehabilitated was made with 50 relapsed addicts. It was found that the relapsed group had more addict friends. There were significantly more Relapsed self-introduced as compared to the rehabs further, more relapsed were reported in the company of friends the rehabs on the other hand reported more family involvement. Majority of the addicts in both groups were young. The relapsed group had wider range of education from illiterates There was no difference in the drug used and method of drug administration in tow groups.*

Key Words:

Addiction became an important and perplexing issue to research psychologist as well as policy makers in india in the last decade. Research efforts were focused on identifying the chain characteristics, personality and psycho-social variables related to the addict earlier investigations in india and abroad have indicated that these could underlie addiction to drugs, researches in west have indicated that there are sub-groups among addicts I, e, addicts who use drugs for different personality types. (Berzins,Ross,English& Holey, 1971, cring& Olsm,1988 and Roithcrocker&craj 1977). The most interesting observation is that not all addict and his response to treatment ? This question has been raised by many investigators. (Mathan-1988) does this relate why do some addicts relapsed while other rehabilitated ?

The addicts under go treatment and detoxification and within a short period some are back on drugs. Relapsed are a problem for those who work with addicts. Researches conducted so far have indicated that along with personality, other variables such as friends influence, social pressures, stresses etc. are also related to relapses. Brown (1971), reported influence of friends, relief from personal problems and easy availability as reason for relapsed in heroin addicts. Mariatt (1989) in a factor analytic study on a sample of Malaysian addicts also reported in fluence of friends and family problems as important factor in relapses.

The queries on which are study was bases were as follows:

- 1.Do more relapsed addicts have association with other addicts as compared to rehabilitated ?
- 2.did friends initiate relapsed and rehabs to drugs ?
- 3.is the family involvement and support similar in both groups ?
- 4.is the pattern on drugs use in both groups similar ?
- 5.Are prereasons for drug use in both groups similar ?

It was also planned to compare present age of addicts and age it initiation.

METHOD :

SAMPLE : The sample of rehabilitated and relapsed addicts was drawn from various hospitals and rehabilitation clinics. A total of 50 rehabs and 50 relapsed addicts are reported by their docoters to have undergone deoxidization treatment at least once in the last six months the addicts also verified that they had relapsed after treatment .the rehabilitated addicts are also referred to by the doctors under a home they had under game treatment and are reporting for regular check ups and follow up.

Procedure :Interview schedule was prepared and a pilot study Was administered (N=10).Amendments were made, wherever required question their association with other addicts, family were and involvement were inhered in the schedule. This was after the addicts became comfortable with the interviewer.

Result : The majority of addicts in both groups were young rehabs were younger as compared to the relapsed addicts (Table-1) though the difference between income means is not significant (Table-1) majority of the rehabs (78%) earned above rupees 2100 per month as compared to only 30% of the relapsed patients below the 2000 rupees per month level. Drugs were initiate earlier in both groups, however the relapsed group started at significantly younger age (Table-1) the majority of the groups report initiation by friends (Rehabs 50% relapsed 40%). However , only 6150 rehabs self introduced as compared to 13150 of the relapsed ($\chi^2=21.45,P,001$). Further more relapsed reported that most most of the friends were addicts as were 8150 addicts (76% ascompared to 64% rehabs) Among the rehabs there friend were addicts as compared to only 1150 the relapsed group ($\chi^2= 7.22$)

Table-1

	Age	Income	Initiation
Rehabs	X 26*** 57	X Rs. 1806.3 SD.9.83	X24.1 S4.55
Relapsed	X27.9*** 5 7.99	XR. 1799.3 SD.1.02	X21.9* S4.61

(1) *t = 2.41 df = 98 P <.05

(2)*t = 1.50 df = 98 P <.05

The reason given for trying cut the drugs for the first time were similar in both groups. However, more rehabs in report peer pressure as compared to the compared to the replaced for initiation to drugs while more, relapsed tried out drug because of rejection in love and out of curiosity. The reason for relapsed are varied but peer group pressure was given by majority of the relapsed as the reason for going back to drugs (Table -4) the rehabs on the other hand report more involvement of family I their

Table-2

Reason for using drugs

Reason	Rehabilitated	Relapsed
Confection family	07	08
Rejection in love	01	04
To increase sexual power	01	00
Peer pressure	27	22
Curiosity	12	14
Other	02	02
Total	50	50

Table-3(A)

Type of drugs used by addicts

Drugs	Rehabilitated	Relapsed Frequency
Heroin	30	27
Opium	04	07
Charas	08	15
Bhang	03	01
Hasshish	03	00
Alcohol	02	02
Total	50	50

X = 5.44 NS

Table-3 (B)

Method of using drug

Method	Rehabilitated Frequency	Relapsed Frequency
Smoking	28	27
Sniffing	01	03
Injection	01	02
Chasing the	13	12
Dragon	04	04
Other	03	02
Total	50	50

X = 5.768 NS

Table-4

Reasons for relapsed caserpoitive

Reason	Frequency
Felt sleep and restless toerant Decreased and difficult to resist	14

Ever pain in body, Lubriction, Difficult to resist	09
Pressure of truants and difficult to resist	20
For mtcymnt and to avoid rest less ness	07
Total	50

$X = 8.08, P2.05$

Rehabilitation (47180) As compared to the involvement friends of (3150)

($X = 38.72, P2.01$)

DISCUSSION :

The result of this study are in line with the findings of earlier investing. Most of the addicts in both groups were from a younger age group (Najam&Riaz 1982) initiated at a significantly younger age as compared to the rehabs. Further more, majority of the addicts in both groups were initiated to drugs by friend. However, there are fever rehabs than relapsed who self introduced drugs. There appears to be a stranger need to seek out drugs in the relapsed addicts further more, the relapsed addicts report more relapsed because they started using the drug again in the company of friends. this is substantiated by the finding of Gossip at all (1989) study which reports more relapsed occurs in the company of other users. Thus, more relapsed hand addicts tridents as compared to rehabs. The resultsupport our expectation that more relapsed addicts have friend who are addicts as compared to rehabs. Perhaps the relapsed caught out the companyof other addicts as a support group where was the rehabs had family support.

The rehabs repot a role of family involvement in their rehabilitation. This could be due to support of family at the critical time. It could also be due to greater deference, lower aggression and autonomy as compared to dropouts from the treatment programme.

The rehabs and the relapsed group did not differ on the patterns of drug use and drug administration methods. This could be attributedthe fact that these were the major substances available in the drug market, further the prevalent and most common modes of use are smoking and chasing the dragon. Injection heroin seems to be the least favored route in both groups this is interesting in view of the findings of the study by gossip at al (1988). In which heroin chasers were found to be significantly younger than the injection. Both the groups in the present study are younger than the injection, but closer to the chaser in age.

The present study is supportive of earlier investigation which indicate that there may be different characteristics among the addict population and this may in turn determine their response were initiated at a younger age by friends but a significant member also self introduce. The relapsed have more addict friends and have relapsed have more addict friends and have relapsed mainly because of pressure from friends.

Identification and screening of addicts may be more important as it can provide a base for effective treatment and therapy. Thus, any treatment programme should provide all the social and emotional support to the addict during and after treatment so that it is tailored to the personality and needs of the addict.

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