Drug Addiction And A Complex Of Contributory Causes

Posted on January 14, 2020

(1) In this age of frustration and anxiety, an exceeding number of people, especially the youth, are falling prey to substance abuse to find an escape way from their social and domestic responsibilities, to relieve panic experiences, or just to realize the euphoria pictured in popular media productions. Effective rehabilitative intervention focuses on the identified risk factor of undesired indulgence, and the identified factors help to formulate drug regulatory regimes. An extensive amount of research and many studies have established and then distinguished the factors that have a direct bearing on the acquisition of addictive behavior. Recognized causation and the risk factors responsible for drug or alcohol abuse appear somewhat entangled with the general causes of anxiety, paranoia, stress and other psychological conditions. Generic causes of drug addiction are but are not limited to, domestic problems, mental makeup, sociological pressures and peer influence. Genetic disposition, gender roles, personality makeup, mental health, family-oriented risks, traumatic events, socioeconomic compulsions, bad peer influence, anti-social attitudes, and macro-environmental factors are some of the major risk factors that may induce a person with weak will-power to fall into the slippery slope of substance abuse. The fact that obfuscates the study of causes is that researchers have found that some of these factors come out as outcomes of persistent drug abuse as well. Furthermore, risk factors, their intensity, influence, and potential to trigger the habit also vary from person to person and case-to-case basis. To outline the precise etiology of drug addiction is not an easy task, as there is a need to distinguish associated variables that precede, follow or coexist with the habit.

Use Vs. Abuse:

(2) Initial drug use and drug addiction are two of the different problem areas for researchers who tax their nerves to discern both of these conditions under different heads. Stein and colleagues highlighted, in a study of drug abuse on students, that drug use and abuse, i.e., problematic use, are determined varyingly (Stein J, 1987). Gorsuch observed that most of the first users do not develop a permanent addiction (Gorsuch, 1980). This finding is suggestive of the fact that the risk factor for each stage has to be unique. Primarily, it is possible that social factors impelled a person to use drugs, but later on, he or she found refuge in self-medication to relieve emotional distress — an offshoot of psychological underpinnings. Both the use and abuse of a drug have a lot to do with the level of knowledge and awareness a user has of the nature of the substance, its physical hazards, psychological issues and social implications (Shor, 2012). Adults are more likely to abuse cannabis or other similar drugs if the use is harmless in their belief. Under this line of thinking, early rehabilitative methods focused on imparting a better knowledge base to the abusers and keeping them abreast of the perils and the deathtraps they are going to suffer soon. Little commitment or, for that matter,

competency in education has also been associated with deviant behaviors. These and other related academic concerns like absenteeism, poor performance and suspension from the classes further worsen the chances of a child to attain a better social status. The resulting sense of deprivation, uselessness, and self-denial leads such children to resort to the ecstasies of drugs in their endeavor to ascribe self-assumed importance to themselves.

Genetic Factors And Role Of Gender: A Complicated Mix

(3) Apparently, biological factors may have no direct relation with a tendency to drug or alcohol abuse, but researchers have brought forward the fact that genetic factors lead a person from normal use to the level of abuse and, hence, to the addiction (Gwinnellet al. l, 2008). Genetic factors are responsible for the alcoholism both in men and women in addition to the environmental conditions. This shared environment of family members could exert significant influence and increase the risk of alcoholism. In this assertion of the environmental factors, a child reared by an alcoholic parent has a heightened proclivity to become an abuser, as the genetic makeup may be a critical element in the development of alcoholism. It may also be possible that certain genes cause a person to get alcohol, but this has not been proven by scientific evidence as yet. It has been observed that men start drinking alcohol at an earlier age as compared to that of women, and they are also heavy drinkers in relation to the ratio of women. Underlying factors behind this phenomenon may be that the males usually have more outward exposure,e and their adventurous nature may have been responsible for their earlier adoption of the nefarious addiction. A Survey conducted in Sydney explored that males were heavy drinkers and four times more likely to use other substances like cannabis (DuBreuil, 2017). It is also understandable that men are more prone to the detrimental effects of sociological pressure, and some of them, overawed by dejection and despair, may fall into extreme drug abuse. Grieved by workplace distress and job-related afflictions, both genders might reach a breaking point in their emotional health, and bad peer influences may lead them toward excessive addiction.

Personality Traits And Attitudes Determine Addiction Propensities.

(4) Personal likening, leanings, and preferences give rise to idiosyncratic attitudes, which may get potent enough to coalesce a person into the adoption of dangerous behaviors. According to the proponents of Control Theory, lack of adequate social relations and group ties accentuate deviance in adolescents. Estrangement from the prevailing social fabric and dissension from the values of society have a close connection with drug abuse. Rebellious tendencies, resistance to traditional authority, approval of deviant behaviors and norm less-ness are some of the attitude-related risk factors associated with excessive substance abuse. Social alienation is one of the prime factors that contributes extensively to physical and emotional health disorders. Alienation defines a person’s

relationship with the societal framework by highlighting the measure of isolation and seclusion he or she has acquired knowingly or unknowingly. Societal factors cause alienation, and as a response, adolescents tend to accustom themselves to subcultures according to their mental and psychological tendencies. Aversive and materialistic societies provide lesser harmony to their members who find themselves on the outskirts, and consequently, they seek solace in the highs of substance abuse as an emotional reaction (Lessa, 2008). Dangers of alienation can be avoided through public engagement opportunities, community services, and productive lifestyles. Contrary to the mechanized society, a social setup that relies more on the human element may impart a greater sense of assimilation to the volatile youth and fortify harmonized and productive lifestyles. These personality traits are attached not only to drug abuse but also to other problematic behaviors.

Do The Family May Induce Addictive Behavior?

(5) The institution of the family is the single most influential childhood factors that shape, models, refines, and finalizes adaptations of a child for the rest of his life. Many researchers have acknowledged the overarching impact of familial conditions on the habit formation of a person. Accurate assessment of familial influences on drug addiction is a complex phenomenon and is not easy to quantify. The coherence and consistency of family management, scale, and warmth of communication and parenting styles have invariably been predicted as factors that determine the attitudes and habits of the family members. Ineffective management tactics, negativity in communication such as blaming and unwarranted criticism, weak or negative Inter-family relationships with a lack of affection or interest, and child abuse are some of the pitfalls that contribute to words the children, even the adults, seeking refuge in addictions and exposing themselves to more hazardous relationship standards.

The most exacerbating impact on children comes from parental role modeling. Children whose parents have anti-social or criminal leanings are more prone in their adulthood to adopt adverse habits readily. Parental drug abuse tarnishes the conducive environment of the family and hampers family dynamics,s which, in its part, increases the possibility of child abuse and maltreatment (Ponderet et al., 2010). Role modeling and other family-related risk factors work jointly and exert both direct and indirect effects on a young one’s life and his risks of drug abuse. Single-parent households are more prone to the risk factors for substance abuse. It is a recognized rehabilitative practice for clinicians to take into consideration the family needs in an adolescent treatment venture. If family fissures appear as contributing factors to the victim’s drug usage, he is more likely to relapse into the habit soon after his return to the same in-group. On the other hand, the institution of family can also prove as one of the most effective protective shields against relapse and can support the treatment decisively. It is the attitude and preoccupation of the family members that determine the actual contribution of the household, i.e., protective or destructive. Additionally, apart from parental influences, siblings, cousins, uncles, and even grandparents or significant others may also have a place to bear the blame for the drug abuse of a particular member. Family experience, family exposure, and overall relational system may affect the etiological implications of substance abuse t

great deal.

Traumatic Experiences Or A Chronic Mental Illness May Lead To Addiction.

(6) Adolescents who have had exposure to any of the traumatic incidents during their lives are at far greater risk of drug abuse, illicit behavior, and self-destructive or suicidal tendencies. The developmental Damage Model highlighted the adverse impacts of physical abuse on children who nourish an abnormally depreciative self-image. Such a negative self-image hampers subsequent socialization, and consequently, such children find this world unsafe and aversive to them. Tormented by emotional pain, children lurk into using drugs or become alcoholics and proceed further towards self-derogation. Treatment of trauma with drugs is another problem for therapists who complain of dropping out of patients on account of their overbearing fear of re-experiencing the trauma, mistrust of others, and hopelessness about the world and their lives. Such patients have also been seen as acquiring dependence disorder under their dormant urge to revitalize their persona against the odds of the world (Cimino, 2015). Even under treatment, either for traumatic stress disorder or dependence disorder, traumatized patients are less likely to cooperate with the caregiver. Underlying stressors must be addressed accordingly to materialize the benefits of the treatment and to make them more responsive to the cure and rehabilitation process. People suffering from distress, depression, and lowered self-esteem are at greater risk of fluctuating from their healthy routines towards the risky and hazardous path of addiction. These people have already lost their courage to face the responsibilities of the world and are more of a flowing stream that may tread any of the available directions if not guarded properly. Being mentally ill, they have much less acumen to distinguish right from wrong than healthy fellows (Kumari, 2016).

Socio-Economic Problems And Peer Influences:

(7) Socio-economic status and drug abuse are intuitively interlinked with each other, and both have reciprocal effects on the other side. Poor living environments have a direct relationship with substance abuse as it is one of the most important risk factors. If not direct, socioeconomic status has an indirect effect on the habits of addicts in the sense that economic deprivation and status denial accentuate the propensity of adolescents to adhere to their group norms of drinking. High personal income also has a relation to excessive alcohol abuse, which attests to the fact that elites are more indulged in addiction (Mitchell, 2016). A family's social standing and "financial position influences the drinking behavior and peer affiliations," which, at later stages of life, determine alcohol abuse (Mitchell). Low-cost, unhygienic and substandard housing areas are often ripe with people who use and abuse different drugs or are heavy drinkers. Adherence or alliance with peers who are abusers is one of the significant predictors of risk for substance abuse. Both differential association theory and social learning theory support the argument and maintain that peer groups have an important bearing

on attitude formation and the development of bad habits (Peer Pressure and How It Can Cause Drug Addiction). It is not the case that peers exert their outright influence and pressure a child or adolescent to abuse drugs; rather, children, themselves victims of problematic behavior, affiliate themselves with like-minded groups. This very affiliation and bad company reinforce the negative behaviors, including substance abuse.

Conclusion

(8) Adolescents do not indulge in substance abuse merely because they are weak or morally unsound. A range of individual, societal and environmental risk factors have been enumerated by the researchers who maintain the fact that drug or alcohol addiction is not a phenomenon for which a single all-inclusive factor model can be presented. Its etiology reveals that more than one factors contribute their fair share to drag a person from using drugs to the level of abuse. Of these contributing factors, domestic problems, peer influences, sociological handicaps and lack of knowledge are more dominant issues in the identification of its causation. A failure to detect drug or alcohol addiction as part of a larger behavior pattern is a barrier to efficient and timely intervention at a critical time when each factor contributes to another risky behavior and exacerbates the fiasco even further.

Works Cited

Cimino, Andrea N., et al. “Women Reentering the Community: Understanding Addiction and Trauma-Related Characteristics of Recidivism.” Journal of Human Behavior in the Social Environment, vol. 25, no. 5, July 2015, pp. 468-476. EBSCOhost, doi:10.1080/10911359.2014.983257.

DuBreuil, Lisa and Stephanie Sogg. “Alcohol-Use Disorders After Bariatric Surgery: The Case for Targeted Group Therapy: Treatment Can Target the Unique Causes and Stresses That May Raise the Risk of Alcohol-Related Substance Abuse After Surgery.” Current Psychiatry, no. 1, 2017, p. 38. EBSCOhost, ezproxy.grossmont.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=edsgao&AN=edsgcl.480992664&site=eds-live.

Gwinnell, Esther and Christine A. Adamec. The Encyclopedia of Drug Abuse. New York, NY: Facts on File, c2008., 2008. EBSCOhost, ezproxy.grossmont.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=cat01154a&AN=gros.221198&site=eds-live.

Gorsuch, R. (1980). Theories on drug abuse: selected contemporary perspectives. *Interactive models of nonmedical drug use*, 8-23.

Kumari, Veena. “Increasing Cognitive Function May Improve Addiction Treatment Outcomes.” Psychology Today, vol. 49, no. 6, Nov/Dec2016, p. 12. EBSCOhost,

ezproxy.grossmont.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=bth&AN=118742491&site=eds-live.

Lessa, Nicholas and Sara D. Gilbert. Living with Alcoholism and Drug Addiction. Facts on File, Inc, 2009. Teen's Guides. EBSCOhost, ezproxy.grossmont.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=nlebk&AN=274163&site=eds-live.

Mitchell, Kathleen. "Addiction in the Workplace." Businesswest, vol. 32, no. 23, 22 Feb. 2016, p. 15. EBSCOhost, ezproxy.grossmont.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=bwh&AN=113309467&site=eds-live.

"Peer Pressure and How it Can Cause Drug Addiction." M2 Presswire, 23 Sept. 2015. General OneFile, go.galegroup.com/ps/i.do?p=ITOF&sw=w&u=sdccd_grossmont&v=2.1&id=GALE%7CA429541606&it=r&asid=783f8e82fce2c74e2e88701793a1dcc4. Accessed 27 Apr. 2017.

Ponder, Fred T. and John R. Slate. "Family of Origin Addiction Patterns Amongst Counseling and Psychology Students." Forum on Public Policy Online, vol. 2010, no. 1, 01 Jan. 2010. EBSCOhost, ezproxy.grossmont.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=eric&AN=EJ903827&site=eds-live.

Shor, Ron and Shabtay Levit. "Persons with Drug Addiction as Knowledge Providers: Their Contribution to Social Work Education." Journal of Teaching in Social Work, vol. 32, no. 2, Apr-Jun2012, p. 190. EBSCOhost, doi:10.1080/08841233.2012.667749.

Stein J, N. M. (1987). An eight-year study of multiple influences on drug use and drug use consequences. *Pers Soc Psychol*, 94-105.

Sussman, Steve. "OP-110: Substance and behavioral addictions: Concepts, causes, and cures." Journal of Behavioral Addictions, vol. 6, no. S1, 2017, p. 52. Academic OneFile, go.galegroup.com/ps/i.do?p=AONE&sw=w&u=sdccd_grossmont&v=2.1&id=GALE%7CA483829776&it=r&asid=498521d6643800e291cc6872c3c54056. Accessed 27 Apr. 2017.