

Psychosocial Problems and Its Associated Factors among Individual Residing in Drug and Alcohol Rehabilitation CentersSudarshan Basnet,¹ Arun Kumar Koirala,¹ Niranjana Shrestha¹¹School of Health and Allied Sciences, Faculty of Health Sciences, Pokhara University, Pokhara, Kaski.**ABSTRACT**

Introduction: Psychosocial problems among substance abusers are one of the important, challenging public health problems in a worldwide context which is often remain unrecognized and left untreated. This study aims to identify the psychosocial problems and its associated factors among individuals residing in drug and alcohol rehabilitation centers.

Methods : A cross-sectional analytical study was conducted among 271 participants from January to July 2019 who are residing in four different rehabilitation centers in Kathmandu. A standard tool 'Drug Use Screening Inventory – Revised (DUSI-R)' was used to assess psychosocial problem with face to face interview method. Data were entered in Epi-Data and analyzed using SPSS.

Results: Majority of the participants (54.2%) had secondary level education. Most of the participants (43.5%) were unemployed and were found to be involved in substance abuse. The majority of the family member of the participant (62.7%) didn't use alcohol. The starting age of most of the participants (94.5%) who were using drugs was less than 25 years. The mean score of DUSI-R tools was found to be 48.89. The majority of the participants were using alcohol, which was easily available in the market. It was also found that the psychosocial problem was associated with age and education. The psychological problem is seen in less than half (46.1%) of the participant and found to be more prevail in below 30 years of age group and mostly who are in secondary level of education.

Conclusions: About half of the participants residing in rehabilitation center had psychosocial problem. Secondary level education period is a crucial time to be more aware where students are at greater risk of having substance abuse including psychosocial problem.

Keywords: *Psychosocial problem, drug and alcohol, rehabilitation centers*

INTRODUCTION

The brutal consumption of alcohol and other drugs among adolescent is a growing problem across the globe. The adolescent is a phase, which accounts for more consumption of tobacco, alcohol and other drugs, including marijuana, heroin and so on. This is a serious social and public health problem.¹ The impact of substance abuse can be seen not only in health and life of the individual, but also in societal and community level.² Individuals are commonly facing problems like poverty, loneliness, poor educational status and unemployment, which reveals association with psychosocial status of individual consuming harmful substances.^{3,4}

Globally, around 29.5 million people are suffering from a drug use disorder out of quarter of billion people in 2017.⁵ In 2014, United Nation Organization of Drug and Crime (UNODC) states that 0.2 million people are still victim of drug related death.⁶ Alcohol consumption attributes 4% of all deaths worldwide. Alcohol and illicit drug use contribute 5.4% of the total global burden of disease and such problems are still persisting and

growing globally.⁷ UNDOC estimated that in 2013, one out of twenty people (age group 15 – 64) used an illegal drug.⁸ Various studies have shown the widespread occurrence of substance abuse is excessive in male and in the age group of 15 years and above however it is generally initiated in adolescence phase.⁹⁻¹¹ However, its consumption in female has also been increasing.^{10,12}

Different studies reported psychosocial problems like peer pressure, behavior pattern, work adjustment, etc. among substance abusers which compelled them to use licit and illicit substances.⁹ Substance abuse not only possess physical and psychological health effect, but also have great role of psychosocial problems which is due to peer influence, unemployment, poor education level, loneliness, broken relationships etc.^{9,10}

In Nepal, substances (mostly cannabis and alcohol) have been a part of spiritual and religious culture and taken as traditionally

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for centuries.¹³ Since 1970s substance abuse has been prevalent in our country which displays substance abuse as a serious health issue as diseases¹⁴, which leads to serious health consequences.¹⁵ A rapid assessment conducted in Nepal showed that the mean age of drug abusers was 28.3 years, mostly unemployed and students.¹⁶ The consequences of substance abuse can be seen in association with physical, psychological as well as psychosocial factors.⁷ The substance abuse is related to many serious crimes, violence, abuse and neglect and other psychosocial problems like harmful behavior pattern, poor relationship, lack of social competences etc.^{9,14}

In Nepal, different rehabilitation centers are running different activities promoting psychosocial health, but prevalence is still significantly high.¹⁷ To address some extent of drug abuse problem in Nepal, medical and psychological support with recreation activities have been organized by different rehabilitation centers. It is seen that physical and psychological aspect of substance abuse has been analyzed in various studies, but a psychosocial problem has not been taken as important issues whereas proper identification of psychosocial problem and effective intervention to promote psychosocial health is still out of sight. The aim of this study is to identify the psychosocial problems and its associated factors among individuals residing in rehabilitation centers.

METHODS

A cross sectional analytical study design was used to identify the psychosocial problems and its associated factors among individual residing in selected rehabilitation centers. The study method was quantitative. Most of the rehabilitation centers in Nepal are located in Kathmandu, where substance abusers with psychosocial problems are living. The study population was all individuals above 18 years of age with substance dependence residing in selected rehabilitation centers. The total sample was 271. A simple random sampling technique was adopted to select the rehabilitation centers from the list of rehabilitation centers. Four rehabilitation centers were taken using the lottery method and a complete enumeration was performed among the individuals residing. Individuals with substance abused who have stayed in rehabilitation centers for 3 months or more were participated in the study. Individuals with age group of above 18 years were selected in this study. Standard tool, i.e. Drug Use Screening Inventory-Revised (DUSI-R) was adopted with the permission of author Dr. Ralph Tarter, and translated into Nepali version and pretested for necessary amendment. Pretesting was conducted in 10% of obtained sample size from rehabilitation centers, Kaski. Practicability and usability of the instrument were maintained by pre-testing the tool. DUSI-R is a validated

standard tool in Nepalese context also.¹⁸ All the items were categorized as dichotomous (yes and no) and the dependent variable was psychosocial problems (yes, no). Univariate analysis was shown in frequency and percentage. Bivariate and multivariate association was done to observe the relation between dependent and independent variable. Permission was taken from selected rehabilitation centers and also the approval for conducting research was obtained from the Institutional Review Committee of Pokhara University.

RESULTS

Almost all (98.5%) participants were male. Majority (68.3%) were less than 30 years old. The median age of the participants was 26 years (IQR=12 years). Similarly majority of the participants 54.2% had secondary level education. In case of marital status, majority of the participants 61.3% were unmarried. Most of the participants 43.5% were unemployed and 50.9% lived in a joint family. The percentage of family having income less than Rs. 50,000 was 65%. Majority of the family member of the participants (62.7%) didn't use alcohol.

The starting age of most of the participants (94.5%) who were using drugs was less than 25 years. The majority of the participants (57.6%) use alcohol followed by opiates (45.4%) and cannabis (34.3%). Others drugs majorly used by participants were Brown sugar, IDU and weed. Most of the participants (71.6%) use drugs orally followed by injection (30.3%) and inhalation (16.2%). Similarly, 57.9% of the participants consume drugs/alcohol more than three times a day.

The DUSI-R structured questionnaire was used for data collection. Areas address in the tool was substance use containing 15 items, behavioral pattern containing 20 items, mental health with 20 items, social competence with 14 items and peer relation with 14 items. All the items under these areas was categorized as dichotomous (yes=1 and no=0) and the dependent variable is psychosocial problems. The total score was calculated by scoring all the items and the value above mean value (48.89) was taken as psychosocial problem and below was not taken as psychosocial problem.

Table 1: Psychological problem in participants (n = 271)

Characteristics	Frequency	Percent (%)
Yes	125	46.1
No	146	53.9

Table 1 shows that less than half (46.1%) participant had psychological problem.

Table 2: Association between different variables

Variables	Psychosocial problem		Chi-square p-value	
	Yes	No	χ^2	
Age				
<30 years	93(50.3%)	92(49.7%)	4.030	0.045*
≥30 years	32(37.2%)	54(62.8%)		
Education status				
Illiterate	7(29.2%)	17(70.8%)	10.541	0.014*
Basic	15(30.6%)	34(69.4%)		
Secondary	78(53.1%)	69(46.9%)		
Undergraduate and above	25(49.0%)	26(51.0%)		

* Statistically significant at $p < 0.05$

Table 2 shows the association of socio-demographic factors with psychosocial problems. The variable age and education status shows association with psychosocial problems at 5% level of significance using chi-square test.

Table 3: Associations between different variables

Characteristics	Unadjusted OR(95% CI)	p-value
Age		
<30 years	-	Ref
≥30 years	0.586 (0.347-0.990)	0.046*
Educational status		
Illiterate	-	Ref
Basic	1.071(0.368-3.122)	0.899
Secondary	2.745(1.075-7.013)	0.035*
Undergraduate and above	2.335(0.828-6.589)	0.109

Table 3 shows the unadjusted OR and their 95% confidence interval for factors associated with psychosocial problem. Bivariate analysis showed that variables with p-value < 0.05 i.e. age and educational status were significantly associated with psychosocial problem. Regarding socio-demographic factors, more or equal to 30 years were 0.586 more likely to psychosocial problem compared to those less than 30 years. Likewise, those participants having secondary level education were about three times more likely to have psychosocial problems as compared to participant with illiterate. No significant association was seen in adjusted odds ratio.

DISCUSSION

This study shows about half of the participants had psychosocial problem. This study showed that the mean of overall psychosocial problem scores of the respondents was 48.89 while similar studies in Nepal states 60.42 as a mean score. A similar study in Turkish male having psychosocial problem with a mean score (43.08) which is less than the both study conducted in Nepal.^{1,10}

This study shows that almost all (98.5%) are male which is similar as study conducted in Brazil and Canada i. e. nine-tenth of the participants were male. A study conducted in Nepal states nine-tenth of the participant is male.¹⁸ This study also states the

majority of the family are joint family (50.9%) while a similar study states more than three-fifth are living in traditional joint family.¹⁶ Similarly, this study states that more than two-third are unemployed while same study states that seven-tenth¹⁹, two-fifth²⁰ and more than one-fourth¹⁸ are unemployed. A research conducted in Croatia (2009) which revealed a family history of consumption of drugs/alcohol was three-fifth while this study states inverse of the study, which states three-fifth of the participant's family member weren't using alcohol/drugs.¹⁹ Family history of substance was significantly higher among the users while this study didn't show a higher history of consumption.²¹ A study conducted in Brazil²⁰ states the mean age of the participants was 38 years while a study conducted in Nepal states the mean age was 29 years which is found similar to this study.¹⁸ The minimum and maximum age of the participant was 11 years and 68 years while the study conducted in Nepal states 15 years and 68 years respectively.¹⁸

The mean age of the consumption of the drugs by the participants was 17 year which is less than the national average, i.e. 23.8 years¹⁶ and similar to study conducted in Nepal.¹⁸ Similar studies conducted in Ireland states that it was 18.44 years.¹¹ This study states around 95% of the participant starts drugs/alcohol before age 25 years while similar study in Nepal states it was 92%.¹⁸ A study conducted in Nepal state three-fourth of the participant had consumed alcohol¹⁸ while the study conducted in Turkey¹⁰ states one-tenth of the participant consumed alcohol while this study states three-fifth of the participant consumed alcohol. A study in Nepal states about three-fifth of the participants consumes more than three times a day which is similar to this study. Same study states more than three-fifth use injection as route of consumption while this study states about one-third of the participant use injection as a route of consumption which is nearly similar to this study.¹⁸

A research conducted in Canada (2014) to identify variables associated with drug and alcohol abuse confirms that in socio-demographic variable like age and gender are associated with psychosocial problem.⁴ Both of the conducted research revealed similar findings which showed an association of demographic factors with substance abuse.¹⁹ A study conducted in Nepal states that age of consumption and mode of substance use is associated with psychosocial problems while this study didn't show any association between them.¹⁸

A research conducted in Japan (2013) to identify psychosocial factors associated with substance use while this study didn't show any association among them.²² Similarly, a study conducted in Nepal¹⁸ and Turkey¹⁰ among substance users shows the association between substance use characteristics and psychosocial problem which wasn't seen to be associated in this study because of higher difference in mean score of the

psychosocial problem. A study conducted in India states the age of onset, family system and demographic factors of substance use contributing psychosocial problems.²¹

CONCLUSIONS

About half of the participants residing in rehabilitation center had psychosocial problem. Most of the respondents seen that they began to take substances below 25 years of age and most of them had more psychosocial problem. The majority of the participants were using alcohol, which is easily available in the market and can carry with them and is not considered as illegal as other substances. Secondary level education period is a crucial time to be more aware where students are at greater risk of having substance abuse including psychosocial problem. The majority of the respondents found unemployed who fall into the substance/drug abuse. The unemployed persons have to seek support for each and every step from the others where financial expenditure activities come ahead, which may create mental tension that may force them to engage in substance/drug consumption to get relief from. Therefore, unemployment in those groups is also a notable area to be considered.

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