

# The Families and Relative's Effort in Supporting the Treatment and Rehabilitation of the Youth That Support the Relapse Prevention

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**Abstract:** - The main objective of the study was to assess the factors leading to relapse of substance abuse among the youth after their rehabilitation in Tanzania. Specifically the study sought to identify the families and relative's effort in supporting the treatment and rehabilitation of the youth that support the relapse prevention. The study employed mixed research design and used different methods of data collection which included questionnaires that used to collect the data from the youth who had the history of using the substance abuse and relapse, the in-depth interview used to the total youth who were relapsed at the time of data collection, and Focus group Discussion(FGD) was used to collect the data from the parents and relatives of the youth and the staffs working at the rehabilitation centre at Methadone Assistant Treatment and the sober house. The youth who had the history of relapsed were (n) 80 and the youth who were total relapsed were (n) 20. The findings showed that parents, relatives and other people in the community did not have any knowledge on substance abuse and relapse. Youth re-used the substance abuse due to family conflict, mistrust by family members, and availability of the drugs and lack of job. Thus the study proposes that after-care-programs should be established and organized to support the after being discharged from treatment and rehabilitation services.

**Key words:** Substance abuse, Youth, Treatment and Rehabilitation, relapse

## I. INTRODUCTION

Substance abuse is an illegal drug use whereby a person use it for his or her satisfaction, the drugs used without the doctor's prescriptions. According to (Vallersnes, Jacobsen et al. 2019), substances abuse refer to any potential substance of abuse including alcohol, prescription drugs, illegal drugs, and others. Drug abuse thus a kind of a mood altering feels. Drugs may be abused by inhaling, sniffing, swallowing, or injecting into oneself (Possi 2018). Substance abuse has may effects to the people who are using them including physical effect that lead the substance abuse clients to get the diseases like hepatitis c, and HIV if they use the drugs through injections that become unsafe for them, but the substance abuse clients probably may suffer psychological problems through the mental illness, especially if they use the marijuana. Abuse of drugs such as cannabis, amphetamine, and cocaine are strongly associated with abroad range of negative health implications such as traffic accidents,; sexually transmitted diseases, mental problems and suicide,;

as well as social problems including poor academic achievement, delinquency, and violent behaviour(Filges, Andersen et al. 2018).

The substance abuse clients become addicted with the drugs that they are using such as heroin and cocaine and thus situation make them to be sick that enforce them to be very difficult to quickly quit from using them even if they like to because they become addicted with those drugs. Individuals with heroin and cocaine addiction prefer to use these drugs in distinct settings, mostly at home in the case of heroin and mostly outside the home in the case of cocaine (De Pirro, Galati et al. 2018);(Durjava, Visick et al. 2018).

The substance abuse clients require the treatment because they have been affected and fallen sick due the drug addiction. Therefore they are supposed to get the treatment and rehabilitation services through the treatment and rehabilitation centres, and the methadone assistant treatment (MAT) services is among the options of the drug addicted clients to be treated; the sober house and the detoxification method of treatment are also available for the treatment. In Tanzania the most preferable ways of treating the drug addicts in Tanzania is methadone treatment and sober houses, these two treatment potions become more preferable for the drug addicts in Tanzania. Medication-assisted treatment (MAT) involves using medications to treat individuals with opioid or alcohol dependence. MAT for opioid use disorders (OUDs) has received greater attention and support recently due to the current epidemic, although stigma associated with their use remains.(Harris and Jenkins 2018);(Hadland, Park et al. 2018; Livingston, Adams et al. 2018). Substance abuse treatment could be an optimal and perhaps crucial time to address vocational rehabilitation issues. An individual's entry in to treatment services signals a willingness to attempt change, openness to the assistance of others, and a desire to better oneself (West 2008). Comprehensive assessment and individualised approaches that incorporate patient choice and stages of change are considered essential components to any dual diagnosis rehabilitation programme (Eagle, Ma et al. 2019).

The family and relatives support is very important for the substance abuse client's recovery in the treatment and rehabilitations services. Developed societies have created

complex networks of professionally operated health and social welfare programs to help the millions of individuals whose substance use harms themselves and others. Individuals with substance-abuse problems can thus seek help from addiction-treatment professionals in acute inpatient treatment programs, detoxification units, day hospitals, and evening intensive outpatients. Help-seekers can also avail themselves of the advice of religious leaders, trusted friends, family members, and co-workers (Humphreys 2003; Daley, Smith et al. 2018). Family based treatments have consistently found that more drug abusing adolescents enter, engage in, and remain in the family therapy than in other treatments and that family therapy produces significant reduction in substance use from pre to post treatment (Barrett, Slesnick et al. 2001); (Alemagno 2001)

In studying the family and relatives support on substance abuse treatment and rehabilitations, researchers found substance problems affects nearly everyone in our society, including families who experience adverse effects when a loved one has an SUD. Any substance problem can have an impact on a person's physical, mental, emotional, and financial health and create a severe burden for the family (Daley, Smith et al. 2018). Drug abusing women are more likely to report a need for housing, mental health counselling, education, job training, medical care, family support, and parenting assistance when released from jail (Alemagno 2001).

### *1.1 Theoretical frame work*

The study was based on the cognitive learning theory which assumed that children actively construct knowledge as they manipulate and explore their world, the theory is widely used in the study of the person and his or her interactions with the social environments that expected to learn something that gives the acquired knowledge that helping in the person's living social environment. The journey through human learning covers conditioning, cognitive approaches, social cultural theory, memory storage, complex learning, motivation and affect (Ormrod and Davis 2004)., Developing more reliable beliefs, exploring and validating their fidelity, and making informed decisions are fundamental to the adult learning process (Taylor 2017). The cognition is very important not only in helping the substance abuse client to understand the facing high risk situation as through the knowledge of substance abuse, but also to have the knowledge cognitively to face the high risk situation may help the substance abuse clients to be avoided with the relapse after the substance abuse treatment or to be engaged tensional as the inner force of the substance abuse client lead the substance abuse client to face the high risk situations of substance use and decide. Social cognition is a key area of social psychology, which focuses on cognitive processes that are involved when individuals make sense of, and navigate in, their social world. For instance, individuals need to understand what they perceive; they learn and recall information from memory; and they form judgments and decisions (Greifeneder, Bless et al. 2017).

Lack of cognitive ability of a person to the issues of the substance abuse perpetuated with the lack of knowledge on it, lead the substance abuse clients to be at high risk of relapse into using the substance abuse after their recovery from the treatment and rehabilitation services. Through the Knowledge of substance abuse clients help the parents and relatives living with the substance abuse clients to support them, as their support boosts the substance client recovery. However, the lack of knowledge of the substance abuse and high risk situation leads the parents and relatives fail to help them properly that leads to the substance clients to relapse.

### *1.2 Problem Statement*

Research evidence shows that the parents, care givers and other relatives of the substance abuse clients have poor knowledge on supporting the substance abuse clients in their rehabilitations and treatment centres. Sometimes, the families face the conflict when trying to help the substance abuse clients and this affects the substance abuse client's recovery process. Other researchers found that the drug or alcohol use places a great strain on families, and family members typically experience disruption, chronic stress, excessive worry and poor psychological adjustment. In the initial stages, denial of the problem by family members is common. Then, once the problem is recognised, families tend to experience guilt, shame, anger, grief and isolation. These emotions make coping difficult (Gethin, Trimmingham et al. 2016). In this study, the lack of job perpetuate family conflict as the substance abuse clients stay without job, which makes them to be dependent on their parents and relatives. This results into conflict. Thus, this calls for a study on substance abuse client's needs on after care programs.

### *1.3 Research questions*

1. How do the client's family and relatives support on substance abuse treatment and rehabilitations?
2. How much do parents, relatives and other community members have knowledge of helping substance abuse clients?
3. How do the parents and relatives directly help the substance abuse clients in their treatment and rehabilitation services?

## **II. METHODOLOGY**

### *2.1 Research Approach*

The study based on mixed research design which adopted both quantitative research method where the researcher used the submitted questionnaires to the respondents in order to gather the quantitative information from the respondents who participated in the study and also adopted qualitative method whereby the researcher used the in depth interview to the respondents who directly quit from using the substance abuse treatment and rehabilitation services and engaged in re using the substance abuse at the time of data collection. Focus Group Discussion employed to the staffs working at the MAT clinic and the staffs working at the sober house, where the substance abuse client who had the history of using the

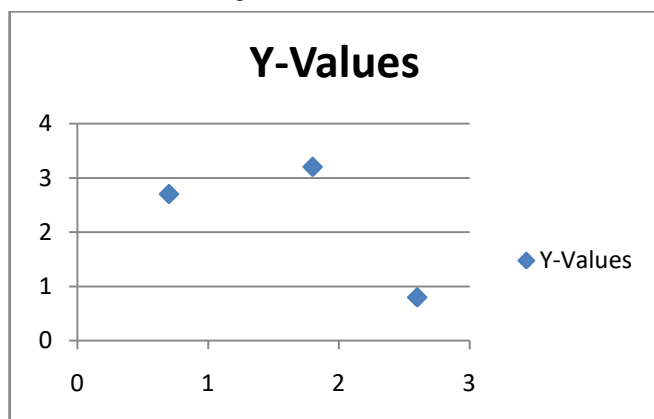
substance abuse and who the treatment and then relapsed were treated and rehabilitated at the time of data collection, also the substance abuse client's family and relatives were interviewed through the Focus Group discussion in order to retrieve their knowledge and support to the substance abuse clients when they were in the course of treatment and rehabilitation services.

## 2.2 Participants

Study involved all substance abusers who were attending at sober houses as a rehabilitation centers and those substance abusers who attended at the methadone assistance treatment (MAT) services at Kidongochekundu mental hospital, also involved the staffs who work at the sober houses as the persons in one way or another were involved in the using the substance abuse and recovered and the staffs working at Methadone clinic at Kikongochekundu mental hospital including social workers who serve the clients attending at methadone clinic for treatment. Also the study involved the client's parents and care givers who provide the support to the clients in their treatment and rehabilitation services when they were at sober houses and when they follow up their treatment at the methadone clinic. The respondent's age was between 18 to 60 years and was those clients involved in the substance abuse client's treatment and rehabilitation services. The respondents range the age of 18 years - 60 years were involved because in Zanzibar, the majority of people who were involved in using the substance abuse starting to use the drug at the age of 18, there rare to get the children and the people of above 60 years abusing the drugs.

## 2.3 Measurements

The Pearson correlation analysis was used as an approach in order to examine the relationships between the factors leading the substance abuse clients to be engaged in substance abuse which finally leads them into relapse from their treatment and rehabilitation services and treatment and rehabilitations which directly or indirectly enforce the substance abuse clients into their recovery process. Bivariate correlation used to measure the reasons that made the substance abuse clients to relapse and the treatment were given to the clients at the treatment and rehabilitation centres as the results shown in the figure below.



## 2.4 Procedure

Systematic sampling procedure was employed to pick up the respondents to participate in the study, the respondents who were the substance abuse clients who had the history of substance defaulter and relapse at MAT clinic selected, the total number of clients who had the history of substance abuse defaulter and relapse from treatment and rehabilitation picked and divided into the total number to be pick from them ( $n = 80$ ) in order to get the interval of the respondents to participate in the study from them which finally the simple random sampling used to get a respondents who directly participated in the study and Purposive sampling technique used to select the respondents who participated in the study ( $n = 20$ ), researcher picked only those substance abuse clients who were currently defaulters and relapsed from their treatment and rehabilitation services either relapsed from using the methadone at MAT clinic at Kidongochekundu mental hospital or at from their rehabilitation from sober houses, the respondents at the time of data collection were total out from their treatment and rehabilitation service.

## 2.5 Ethical consideration

The ethical consideration considered to the all authorities that provided the consent of conducting research. Starting with Open University of Tanzania Post Graduate Department where I got the consent and letter that requested other authorities to give me the permission to conduct the research, I applied and ask the permission to conduct the research in Zanzibar from the Second Vice President office that directly contacted with authorities in the study area to allow me to conduct the research.

Finally, voluntary participation and consent asked from the respondents before collecting the data from them, the respondents were informed about the research needed to be done, and also they were informed that their involvement was a part of the study, therefore they not should not had fear about the information they were to provide to researcher as their information they explored to researcher was taken into highly confidentiality and therefore they have not been harmed based on the information they were provided to the researcher. The respondents were ensured that they were freely to participate in the research and researcher prepared the form of consent that it was provided the opportunity to the respondents to read that and sign

## 2.6 Data analysis

SPSS software used to insert and analysed the data collected from the field. The data inserted to SPSS variable view that all variables were inserted, categorized, labelled, valued, recorded in the data view and finally analysed through frequencies that were determined the results through figures, table, bar chart histogram, that was easier the data presentation and interpretation.

### III. FINDINGS

The FGD findings from the parents, and relatives of the substance abuse clients who got treatment and rehabilitation services at MAT clinic and sober houses. The parents and relatives of the substance abuse clients had no knowledge about the treatment and rehabilitation services provided at the treatment and rehabilitation centres, but they just help their sons, daughters and relatives to send them to the rehabilitation and treatment services. The most of FGD participants had knowledge of teaching them about how to stay and live in the society in a good way. The quantitative findings revealed that 61.3% of respondents responded that their parents, relatives and other people in the community did not have any knowledge on substance abuse and relapse, 15% had knowledge of advising the substance abuse clients to stop using the substance abuse, 8.8% had knowledge that helped them to pay for services of their relatives at the sober house, 5% had the knowledge to collaborate with the clients, 2.5% , 1.3% they did not have knowledge expect get their information about the substance abuse from their spouses and their friends and 6.3% did not respond. This findings support the correlation analysis findings shows that there is a strong negative relationship between the relapse and it factors associated with as a dependent variable and the rehabilitation and treatment services as an independent variable.

### IV. DISCUSSION AND CONCLUSIONS

The purpose of this study was to examine Substance Abuse Client's Family and Relatives Support on Substance Abuse Treatment and Rehabilitations in Urban West Region Zanzibar. Results of this study showed that 61.3% of respondents responded that their parents, relatives and other people in the community did not have any knowledge on substance abuse and relapse. The findings supported by Mueser, et al. (2009) who found that clients with severe mental illness and substance use disorder (i.e., dual disorders) frequently have contact with family members, who may provide valuable emotional and material support, but have limited skills and knowledge to promote recovery. This study revealed that the majority of the parents, relatives and other people in the community they did not have knowledge on substance abuse and relapse, thus the substance abuse clients relapsed after treatment and rehabilitation because they did not get support from their closed relatives including their parents who they were living together, or if the client engaged in the uses of substance abuse again is very easy for him or her to lie his or her closed relatives and denial if still using the substance abuse after treatment and rehabilitation services.

The findings supported Yang et al. (2015) who conducted the Qualitative in-depth interviews for the 20 drug users recruited from a compulsory isolated drug rehabilitation center in Changsha. The interviews were guided by open-ended questions on individuals' experiences in drug use initiation, getting addicted, treatment history, social environment, abstinence, and relapse. Participants were also encouraged to

share their own stories. Interviews were digitally recorded and fully transcribed. The data of 18 participants who reported abstinence experiences before admission were included in the analyses. Results most drug users were able to successfully abstain from drugs. During abstinence, their lives were congested with challenges, such as adverse socioeconomic conditions, poor family/social support, interpersonal conflicts, and stigma and discrimination, all of which kept them excluded from mainstream society. The above the literature supports that the family and relatives support helping the substance abuse clients to recovery through the abstinence from using the drug abuse, but if the substance abuse clients miss the family and relatives support they may recover with great challenges. This study found that most of the respondents said that they got support from their family, as they had received the funds, the food when they were at the sober house, but some them said they did not get any support they just supported themselves, through their own expenses.

Therefore, the study indicates that the substance abuse clients some time need to quite from using the substance abuse, but they reached the limitation that they did not get any support, thus why they need to support them themselves. This may contribute to some substance abuse clients to continue using the substance abuse even they want to quite from them but they have no way to quite, this is because they do not have any support and to be forced to continue using the drugs and this supported by Yang et al. (2015). External and internal social support with abstinence-specific support inclusive is investigated. With certain demographic variables and risk-related variables controlled, greater special type of external social support (as measured by number of children) predicts a lower risk of relapse, which means better effect of compulsory rehabilitation. Participation into some of the institutional programs and experienced personal conflicts for abstinence show no statistically significant with relapse risk (Xiong and Jia, 2018)

#### 4.1 Implications of the findings

The findings reported by this study has the implications for the parents , relatives and care givers help and support the substance abuse clients when they are in the treatment and rehabilitations services. The findings suggest that , the parents, care givers and other relatives of the substance abuse clients should get knowledge on substance abuse on treatment, rehabilitations and relapse, the staffs working at the treatment and rehabilitation centres should give knowledge to substance abuse clients that will help them to face the high risk situation after their discharge from the treatment and rehabilitation services, after care programs should be established and organized to support substance after being discharge treatment and rehabilitation service, the social work intervention should be provided and should be focussed to the parents , care givers and relatives these groups of people have the ability to support the substance abuse at home and even when they are in the treatment and rehabilitation



services and therefore the sustainable recovery through their support effort may possible obtained.

The social work intervention should also base and target the substance abuse clients as by themselves have the roles of accepting the services provided to them and they have to decide to quite from using the substance abuse and also the social work intervention to them will help them to gain more understanding about the services that may boost the attachment of the services and directions provided to them by the staffs working at the rehabilitation and treatment centres so to assist them to face the high risk situations after their discharge from the rehabilitation and treatment services and when they go back to their living communities. Future researchers could looks for after care programs that will support the substance abuse clients after discharge from their treatment and rehabilitation service, the research will help to provide the knowledge on what kinds of jobs and activities that will help the substance abuse clients after their discharge from rehabilitation and treatment services.

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