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**FACTORS CONTRIBUTING IN QUITTING DRUG ADDICTION: EXPERIENCES FROM PAKISTANI REHABILITATION CENTERS**

**1 Bisma Waheed , 2 Imran Sabir (Corresponding)**

1,2 Department of Sociology, Quaid-i-Azam University Islamabad, Email:

[isabir@qau.edu.pk](mailto:isabir@qau.edu.pk)

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**Abstract**

*Overcoming drug addiction is considered one of the hardest decisions to be made by those who endeavor to quit. This study deals with the motivations to quit drug addiction. It aims at exploring the motivational factors of those addicts who are currently seeking treatment in rehabilitation centers of Islamabad. The research employs intrinsic and extrinsic theory to contextualize the findings on theoretical grounds for the motivations that push an individual to quit addiction. The research was conducted using qualitative method to understand the addicts' behavior. Seventeen respondents were selected and interviewed in different rehabilitation centers through purposive sampling. Findings of the study suggest that peer pressure, family stability and emotional attachments are significant in both exposing to drugs and directing towards quitting behaviour. It is concluded that the self-motivated drug addicts are more likely to be successful in quitting drugs as compared to those who are admitted into treatment programs by force.*

**1. Introduction**

Substance abuse has become very common in most of the countries of the world. According to the world drug report 2018 around 275 million people worldwide use illegal drugs, that makes up 5.6 percent of the entire global population. It includes the population aged between 15–64 years, who had at least once used drugs during 2016. About 31 million drug addicts are suffering from drug use disorder and their condition requires clinical treatment for recovery. According to WHO (2015) stated that 450,000 people died as a result of drug use in 2015, out of these calamities 167,750 were caused by drug use disorders (mainly overdoses). Remaining deaths were directly related to the ailments that drug addiction yields which includes hepatitis C and HIV.

Pakistan is considered one of those countries who has highest number of drug users and addicts in South Asia. According to United Nations Office on Drugs and Crime (UNODC) there were 6.7 million drug users in Pakistan in 2013. Whereas 4.25 million among them are drug addicts. Most of the drug addicts are taking cannabis which is the 3.6 percent of the total population. It is concerning that 1.6 million addicts consume opiates, whereas number of Injecting Drug Users (IDUs) is almost 90,000. Consequently, every 3<sup>rd</sup> of the drug users were reported to be HIV positive in 2014 (Quigley, 2014). Pakistan is potentially wasting \$2 billion annually due to drug abuse and trafficking. The statistics reveal that every year 40 tons of processed heroin is consumed in Pakistan that is twofold of America, whereas further 110 tons have been trafficked to international markets (Brown, 2017). One of the major factors in prevalence of drugs is that the neighboring country, Afghanistan, is the largest producer of opium in the world, and around 40% of its produce has been transited through Pakistan in international markets (Mussadaq, 2014).

Though research on physiological consequences of drugs has provided enough evidence to provide genomic vision of addiction and how does it contribute to drug prevention and treatment. However, the effect of peer pressure and glamorised exposure for the initiation of smoking cannot be undermined. Even if the biological vulnerability is present in an individual, it requires an environmental trigger to get started. A basic piece of envisioning the effect of neurogenic look into on existing therapeutic and wellbeing practices will exclude considering issues coming from the social incidents. ultimately, the individuals who feel "destined" to be dependent on nicotine may see no compelling reason to get rid of this addiction. Thus researchers, by and large, felt that over focusing on a biomedical model of advertisement style may prompt a passivistic approach to drugs (Dingel, Karkazis and Koenig 2011).

Human behaviour is derivative of certain motivations that has potential to instigate individual to action. This research explores the motivations of drug addicts who were admitted in two of the most popular rehabilitation centres of Islamabad. To contextualize the responses of the patients of these rehabilitation centres, researchers sought information about how they were indulged into addictive behaviour, for how long they remained untreated and what led them to get admission in a rehabilitation centre. More importantly, researchers were interested to know if there were recidivists who were treated once by these centres and then they became addicts again.

## **2. Literature Review**

Motivation plays a very important role in altering one's behaviour. Treatment seeking addicts were either motivated by intrinsic or extrinsic motivation. Johnston (1998) has explored the reasons for quitting illicit drug use by American adolescents. For this purpose, he evoked responses from young students as they were on the threshold of their adulthood, ageing between 19 and 28. Youngsters get motivated to quit drugs out of several reasons; the most influencing and dominant of them were the threats of physical damage that played a pivotal role in refraining them from further involvement. This was also supported by Menninger (19698) who mentioned prospective health risk could lead to abstinent behaviour. Loss of control and the fear of getting arrested was another promising reason to abstain from drug consumption. Loss of ambition and disapproval of drugs from parents and romantic partner, he claimed, also played vital roles in helping them quit drug addiction. The least important reason to quit drug addiction was found to be its expensive costs or unavailability.

Contrary to the above-mentioned argument, Baumeister (2017) came up with a counter argument that elucidated that drug addicts exercised freewill before coming to perform. They

had ample choices to act rationally or irrationally depending on their preference. Addicts might quit or continue their behaviour by providing justification to their irrational act of smoking. Smoking involved voluntary muscle movements such as lighting it up or inhaling it, as well as involuntary movement such as lungs compression which explains how this act of smoking is more of a voluntary act. Thus, it was a combination of voluntary and involuntary actions in which voluntary action was vividly dominating. Smokers constantly adjust their behaviours with multiple eminent factors such as cost, availability and consequences.

Similarly, Ghouchani et al. (2016) also came up in support of free will and self-realization of addiction. Self-efficacy marks third position in the ladder of importance towards quitting behaviour motivation. It argues that not only external factors but rather internal factors such as self-perception of drugs as negative thing that is constantly bringing shame and humiliation to the person, stigmatizing him in the society as mischievous can also incite feeling for getting rid of this menace of drug addiction. Individuals also evoke motivation to quit drug to become acceptable by society. Some addicts have found to get admission into rehabilitation centres out of their own discretion. They quit on addiction because they found it hazardous more than pleasurable.

Likewise, Oji et al. (2016), “understanding drug addiction as a psycho social problem by the patient is a strong incentive to enter a treatment and continue regular attendance for drug use treatment.” Retention from illicit substance consumption is directly related to the fact of recognition of addiction as a severe problem that needs to be dealt with treatment. It has been evident that those individuals who are well aware of the fact that they have little or almost no control over their addiction and this is yielding further physical problems have a higher tendency to enter in a rehabilitation program and to complete it without dropping it in middle. It is consistent with the facts that less motivated individuals are prone to relapse during the course of their treatment, nevertheless better recognition of problem and desire to seek treatment are helping factors to achieve success.

On the other hand, those who were self-motivated were more likely to participate and perform actively because they drove strength to quit drug from within themselves and thus, they did not feel any coercion on them and engaged more passionately. Hence, it can be asserted that self-motivated patients, according to the results of survey, were prone to receive more benefits than those who assumed they were under coercion of social pressures being imposed on them (Wild, Cunningham and Ryan, 2006). These results are also supported by Bilici et al. (2014).

Furthermore, Noggle, (2016) illustrated other aspects that incentives play an important role in motivating individuals towards quitting drugs. Though it seems that drug addiction is quite a compulsive behaviour but rather it's not because it has been proven that if individuals are bestowed with significant incentive or if they are threatened to be deprived of something which holds importance in their life. Nevertheless, we can say that incentives can spur the individual to seek treatment for drug cessation.

Nonetheless, Yang et al. (2016) identified the mediatory role that treatment satisfaction incorporates in an addiction treatment program. It held that motivation to quit is directly and highly associated with the fact that how much an individual is gratified with it. Alongside of its social support is a companion that cannot be overshadowed. Individuals seeking high level of social support are more prone to successful treatment process with achieved required results. Contrary to this depression and negative feelings regarding once own current situation may lead to negative effect on treatment progress.

At the same time Caputo (2018) investigated a number of motivational dynamics of drug addicts in their rehabilitation treatments. The results excavated a score of motivational factors

that were portrayed in different segments. Commitment to treatment, love and care for relationships, and quest for development of reputation in the community for future probabilities of social cohesion were some of the positive motivational factors that addicts used in treatment process. Amidst the negative motivational factors that included fears: such as dearth of orientation to relationships, snubbing behaviour of people in case of help-seeking, and devaluation in society were of the negative motivational factors that were used by addicts in the phase of rehabilitation. Both negative and positive factors carried a couple of functions; such as expectation of metamorphosis to recovery, and fear of denial while inn quest for help. Thus, it is to be said that there is not only positive inclination towards quitting drug addictions but also certain fears that lead us towards rehabilitation centres. This piece of paper lays emphasis more on negative effects of drug addiction on individual life as the source of motivation to give up smoking (Caputo and Andrea, 2018).

Undoubtedly, treatment programs cast a huge impact over addicts as described by Melnick, Josephine and George (2014). He highlighted the differences between those admissions in general rehabilitation treatment programmes and those in special programmes. To seek out the results, 6500 admissions were surveyed in 38 programmes. Referral centres, therapeutic communities, drug-free outpatients, and methadone maintenance treatment centres were studied along with special programmes for prisoners, homeless and women. Women, black, senior citizens, and primary cocaine users were found to be highly motivated in getting admitted in treatment centres. There is also a difference found in the special admissions and standard population persuasions in rehabilitation centres in which prisoners and women were highly motivated than men and free people. This is, indeed, a special motivational factor to be found that motivation itself varies when it is attached to a certain cluster of addicts. The differences between special program and standard population, as mentioned above, varied in leaps and bound. Thus, we can say that social and biological factors do play a role in quitting or retaining drug addiction.

According to Melnick, Hawke and De Leon (2014) highlighted efficacy of community-based treatment programs, conducted over a sample of people above 40 years of age in America, includes two main dimensions to quit or retain smoking. One of them includes the residential programs to give up smoking, while the other includes clients in main community-based treatment programs. In the former category, the clients are said to have exhibited lesser level of readiness and motivation for the treatment to quit smoking, while the latter is found to have exhibited the higher level of motivation and readiness for quitting smoking. The first category involves the factors of secrecy and lesser public remarks towards the treatment process which involves lesser reward for treatment thus lesser readiness for treatment. On the contrary the second category involves the public reaction in the community-based treatment programmes wherein clients for treatment are motivated by public opinion. Thus, according to this research public opinion and community-based treatment programmes seem to be fruit-bearing motivational factor to quit smoking.

Ferreira et al. (2015) presented a model in which some factors were in agreement with the results of previous research results and also provided ample evidences to strengthen their claim of the roles of parents and family members in treatment of drug addicts. This model suggested that family plays a predictive role in the behavioural change and adherence to treatment. Initially a chunk of addicts entered in treatment programs after facing coercive attitudes of their family members, friends, court orders or clinical problems. In the second stage, addicts began to contemplate their viewpoints on drug addiction; they had conflicting emotions and did not believe they were addict or in need of any treatment or any behavioural change. Nevertheless,

some assented to treatment only after they were allowed to utilize sedatives one last time before treatment. Thus, consumption of sedatives itself can be a motivation to addicts for seeking treatment. Furthermore, self-realization of graveness of problem might also occur in which addicts sought expert's assistance to attain socially acceptable behavioural modifications.

However, Peer pressure and frequent social interaction were significant factors in either adopting smoking behaviour or quitting it as reported by Christakis and Fowler (2008). If an addict found someone from his own family or acquaintances about their quitting behaviour, he himself would get motivated to quit smoking. It was tightly linked with the fact of motivations provided to addicts accompanied by favourable environmental factors.

Moreover, Wild, Cunningham and Ryan (2006) conducted a research that supported positive tendency of free will by checking the relationship between social pressure and client engagement in treatment. They concluded, after studying, that legal and formal referrals to seek treatment could bring clients to enter treatment program, but they will persistently feel coercion on themselves during the course of treatment. Their participation and performance in treatment process will, therefore, be highly affected. They will perform better only when feel to quit from within contrary to social coercions. Individuals' life and future actions are a great deal dependant on the past experiences.

Feng et al. (2010) explored the individual level factors associated to smoking cessation among adults of 6 cities of china. This research paper highlighted multiple factors. Initially they described that past quitting attempts is a significant motivation towards successful smoking termination. Those individuals who have once attempted to quit smoking will be more likely to again indulge in quitting behaviour. Another significant factor explored in this research was nicotine dependence of individual, it is proven that those individuals who have high nicotine dependence will find it harder to adopt quitting strategies so by introducing interventions to lower nicotine dependence will increase quitting behaviour. At last but not least pictorial warnings illustrating potential threats to human life such as lungs or mouth cancer or other fatal diseases are also highly encouraging to quit smoking in especially illiterate individuals.

### **3. Theoretical Explanation**

Self-Deterministic theory by Edward L. Deci and Richard M. Ryan developed in the 1970s attempts to explain motivation-based action as an impetus to engage in an action. It provides energy to an individual to reach to already set end. Theory indicates that there are two types of motivation that are behind every action. One is intrinsic and the other is extrinsic motivation. Intrinsic motivations are those that reflect the natural human instinct of development and curiosity. Every human being has this natural desire to excel and develop to its fullest potential but engaging in an activity requires motivation which varies in its nature and intensity. Research has shown that quality of experience and performance distinguishably differs depending on the source of motivation and what it promises to offer as a result.

Intrinsic motivation is associated with high quality learning and creativity. Individuals get indulged to extend one's capabilities out of volitional activity It is held that natural or self-based motivation is necessary element for social, cognitive and psychological development as it gives spur to increase in knowledge and skills alongside of exercising volition over action. So those actions that are performed under the inclination to grow and develop stays for the life time and results in better performance. For example: Those students who work to avoid punishment in class are extrinsically motivated than those who consider the worth and utility of skill and knowledge and are studying to increase their knowledge. The former one is based

on extrinsic motivation and the latter one is based on intrinsic motivation as the source is driven from within to excel and surpass curiosity.

Intrinsic motivation is found when the task is interesting or either provides satisfaction from committing it. The task can be said to be intrinsic motivation based by taking account of two solid reasons. One is the freewill, whether the person is indulging into an action with his own choice and without any incentive achieving or punishment avoiding behaviour. The other method to check the intrinsic motivation is by the self-report of interest by the doer.

This theory suggests three basic needs that intrinsic motivation comprises of:

1. Competence: This refers to the feeling and experience of getting adept in a task.
2. Relatedness: The requirement of getting acceptance by those who matters.
3. Autonomy: The feeling of controlling the events is the sole of intrinsic motivation.

Intrinsic motivation provides all the important elements that are necessary for making an action complete and successful. It is maintained that feedback and especially positive feedback during task is of great significant as it strengthens the existing intrinsic motivation. However, the negative feedback may either hamper the performance or either diminishes it completely from surface.

The other type of motivation is known as extrinsic motivation which relies on external sources to get stimulation to indulge in an action. It either involves promising incentives or takes away some fear of punishment or potential loss. These are the actions that are taken in order to achieve distinguished outcomes. So, in contrast if intrinsic motivation is done for the enjoyment of activity then the extrinsic motivation is solely done for its instrumental value. However relative autonomy is found in extrinsic based motivational tasks. Some tasks are done with some feeling of choice and autonomy though differs in nature with intrinsic motivations and some are done under complete compliance and external control feeling.

However, the efficacies of intrinsic motivation-based tasks are far higher than extrinsic motivation-based tasks as proved by the researches and held by the theory.

Theory suggests that those who work or perform an action under self-interest which is intrinsic motivation are more likely to achieve their goal with efficacy. This was also proved by research that those individuals who came to rehabilitation centre out of their own will were performing better than those who were brought into centres by others.

Self-motivated individuals had driven their motivation out of multiple reasons such as loss of trust and honour, financial bankruptcy or the loss of control that made them commit crime or other heinous and socially unacceptable tasks. They genuinely felt that their addictions were harming them and deep inside their hearts they were struggling from this evil of addiction. Therefore, they their selves work up the courage to get admitted into rehabilitation programs. As it was their own decision of seeking treatment to quit addiction, so they were performing well. Even the therapist and psychologist also reported that their performance level and attitude towards all activities is quite impressive than others.

#### **4. Method**

This was qualitative research, based on primary data of in-depth interviews of Drug addicted patients, seeking treatments to know about their motivations to quit drug addiction. For this purpose, researcher had taken assistance of counsellors to enrol the patients for the research interviews. Patients were selected on predesigned criteria to take them on board before being interviewed, which include their admission in rehabilitation centre based on drug addiction, mental stability, and no language difficulties. The particular reason for adopting qualitative method of research was the sensitivity of the topic. To extract best and the most reliable data,

patients' trust was gained by spending considerable time on rapport building. Before actually starting interviews with patients, one of the researchers had visited the rehabilitation centres before and had spent time together with patients to build rapport and win their confidence. In-depth interviews are key to success when sensitive data is being dealt in research and therefore researcher employed this technique to gather as much information as possible on patients' subjective experiences and perspectives.

The universe of the research was different public and private rehabilitation centres located in Islamabad. The potential population comprised on on-going treatment seeking patients in these rehabilitation centres. Individuals seeking treatment from both government and private rehabilitation centres were selected for better understanding of phenomenon. Initially, it was intended to include both male and female in the study. Astoundingly, none of the rehabilitations centres had the policy of admitting female drug addicts. The only explanation they provided was that out of some moral and physical implications of treatment over female addicts, they were unable to admit them. Purposive sampling technique was used to select respondents. The number of participants were determined with the help of saturation point, which led to total 17 interviews. Data hauled out was later on analysed using thematic analysis which employs identification and reporting of themes within data leading answers to research questions. No coding software was used but rather hand coding process was utilized to derive themes. This process involved breaking down the transcripts and summarizing and assigning meaningful concept to the data, by researchers.

#### **4.1 Field Experiences and Reflexivity**

The researchers had foreseen that there would be some loophole and inconvenience in seeking data and absence of support by rehabilitees who had still been having mental difficulties in restoration focuses. Nevertheless, the researchers consolidated Psychologists and Counsellors and of organizations to seek help in dealing and extracting effective information. Even, rehabilitation centres were quite reluctant in giving consent to take interviews as they were fearful about the outcomes of research as they considered it might threaten the credibility of their institute. It took a lot of patience and tolerance from the researchers to deal with the respondents who were defensive and were not ready to reveal their information. Stigmatization from society had made the addicts vulnerable and for a while the researchers went to the rehabilitation centres just for building rapport and making the respondents feel at ease with the researchers.

Understanding the reasons for the inception of addiction, quitting motivations, and the hurdles that are related to the treatment process were not less than a challenge due to the access barriers to patients and reluctance to reveal information due to the fear of getting exposed. To narrate the process of drug addiction motivations adequately, the researcher started with the fundamental description of how they first started to take drugs and under what circumstances? What were the roles of the peers and environment in the decision of taking drugs? How did they get motivated to seek treatment in rehabilitation centres? Who brought them in treatment process: their will or external pressure? How do they find things being hurdle to their treatment? All these questions along with other factors were tried to be explored during long duration interviews with treatment seeking respondents.

Getting consent from the rehabilitation centre was quite a task as they were considering researchers to be the potential threat to the privacy of their institutes. Initially, they denied access. However, some centres gave appointment to take interviews but later dealt unprofessionally by constantly delaying and cancelling the appointments. The researchers are

greatly thankful to all those rehabilitation centres that provided information and also assisted through the strenuous task of data collection and interviewing.

## 5. Findings

### 5.1 Becoming an Addict

Without any cause no individual would get them self-indulge into any task. Therefore, the researcher has tried to trace those factors and incidents of individual life that made them take drugs. Every individual is a social animal and cannot live without other's cooperation; therefore, it results in several interactions that are one-time productive and other times destructive. In the modern world where every aspect of life is getting altered, it should be of no surprise that human bonding and connecting circles are also getting changed. It is quite normal to get inspired by the activities of those with whom you are spending greater chunk of time. The researcher got to find the level of influence another cast over individual's life when a respondent aged 33 responded:

*"We all cousins just to have some fun gathered money and send one of the cousins to buy alcohol. None of our cousins had ever tasted alcohol before. We were curiously-driven and just wanted to have some fun experience."*

Similarly, peer influence has been the source of inspiration for consuming drugs for many respondents. Another respondent aged 63 narrated:

*"I got curious that what it does to a man and how does it vary in taste from cigarette that I already was smoking."*

Being accepted by the peer group is of great importance for the individuals of every group. Compliance to group becomes part of their regular life. Some individuals got so much fantasised by the existence of other group that they can hit any limit to be accepted by their desired group members. One of the respondents aged 49 described his story of becoming addict as being influenced by the glam of elderly group:

*"When I enter into their circle, they introduced me to the drugs and to continue being part of that group I had to take drugs."*

Peer pressure does prevail in individual's life to an extent where they can put their life at risk, just to conform the group norms. Another respondent made this point clearer when he described that his first experience was the result of his friend's offering of drug to him. Respondent aged 40, said:

*"Undoubtedly, I was quite moved by the idea of using drugs by watching Hollywood and Bollywood movies, but I did not actually used it until I was presented with drug by my friend."*

He had his curiosity about drugs but never attempted to use unless presented by his close friend. Pakistani culture presents strong bonding of family and relatives. Therefore, getting influenced by the cousins was another major finding that researcher found out.

Curiosity is a natural phenomenon and temptation to any new and inexperienced thing is quite normal in a human instinct. Some individuals have a stronger tendency to hunt for new pleasure giving adventures, so they hit on drugs as well as it seems them quite stimulating



Some other respondents had also been found hardwired to learn and explore the new tempting experience.

*“My cousin used to take drug secretly from his family members. I was curious that what does drug do to him and I wanted to experience how to be tanked up, so I blackmailed him that I will let his family know about his addiction if he does not let me hit on it.”*

The impact of electronic and social media is undeniably pervasive and cannot be denied in this age of global village. Modelling the behaviour of others and imitating is quite a human nature. Different companies and industries deliberately and sometimes unadvisedly promote their products through mainstream media or by entertainment-based movies. Researcher has found that media has the potential to affect human ‘choices according to the opinion they build on screens. Some of the respondents were found to hit addiction by seeing the actors and actresses using it in movies especially in Bollywood and Hollywood movies. They say they found the entire protagonist using drugs in the movies increasing their style and power. It seems to them as if it is the only way to live a heroic life by consuming drugs.

*“I had this longing to taste drugs to get the same kind of power and pleasure that heroes have in their films, so I hit drugs.”*

But the researcher has also found another respondent of aged 34 to be influenced by the films and open consumption of drugs in it but he did not use it until he was presented drugs by his friends. So, it somehow makes sense for the researcher that some individuals are way too eager in practising what they see amusing while other holds back at their choice until peer group is also practising the same.

Around the globe humans are seen into couples or in the form of community because it is impossible for humans to live in isolation. Being with someone you love provides the strength to lead a happy and balanced life, but the situation gets opposite if the individual gets rejected or abandoned by the loved one. It could lead to adverse results. It was found many respondents who were heart broken, seek refuge in drugs to lessen their emotional trauma and pain consumed drugs. Respondent aged 25, described his story by telling:

*“Being heartbroken, I reach out my friend for emotional support. He introduced me to Heroine saying that it will lessen my pain and will help me to forget her.”*

Sometimes, the rejection of marriage proposal was out of cast differences but again it had the same devastating effect over the individuals. The respondents aged 28, explained that it was due to cast differences that the girl’s family rejected my proposal. He said he had to suffer refusal from his family too but at last out of his sheer resistance they acceded to send proposal but, on the term, that if they rejected once he will never ask his parents to send proposal again to her home and will stop meeting her either. He acceded to all the demands but at last remained empty handed. To seek sustenance in his life, after the lifelong damage that he conceived he began to take drugs.

However, it is not only that every single time it was out of rejection in love that the individual hit on drugs but sometimes the respondents were already found using drugs only the separation or rejection by love has only increased the intensity and amount of drug intake as reported by another respondent aged 18 years.

All these explanations provide evidence that if individuals find any negative experience in their life; it could lead to increasing the amount of drugs intake.

## 5.2 Quitting Motivations

The key aim of this research was to find out the motivational factors out of which drug addicts decided to quit on addiction and had joined rehabilitation centres and treatment programs. There are 8 key quitting motivations identified by the respondents.

### 5.2.1 *Loss of honour and Dignity due to Social Disapproval*

Drugs do not have a good image in any place of world. The researcher when asked about quitting motivations from respondents, the first thing they talked about was the loss of honour among the family members and other acquaintances. The respondent talking about his motivation to enter into treatment program aged 24, said:

*"I consider that in a week moment I got de railed but now I recognized my duty towards my family and the responsibility to lead as a productive member of family."*

It was revealed on researcher that responsibility towards family may prove to be a motive to act in a productive way and can possibly refrain from taking addicts. Addicts also loss their worth within the family and society which leads them to alter their behaviour. Another respondent aged 35 replied:

*"I remember the way people used to call me and look at me. I can still feel the disgust and hatred in their eyes for me and for my addiction."*

According to the statements given by the respondents, it can surely be understood how badly drug consumption affects the reputation of an individual in society and among family members as well. Addict individual are no more given importance in any decision of families as they are considered to be sick and marked with impaired consciousness out of drugs consumption. Another respondent aged 18, also shared his story and spoke of the misery and shame that drug addiction imposed on him, he said:

*"I was a constant threat to the dignity of my family. Street fellows used to mock at us saying that these are the family members of drug addicts."*

It was revealed over researcher that the addict person knew that they are bringing shame on the lives of those who are directly or indirectly associated to them. Therefore, this guilty has played a significant role in motivating the addict individual to seek treatment. As it was supported by another respondent who felt the same pinch of affront in his heart aged 34, said:

*"They (Friends and family) no more consider me worthy to be situated among the decision-making process of home."*

The extreme level of emotional trauma and insult was felt on the lives of addicts when the researcher was confronted with these remarks of respondent aged 24, said:

*"I was nothing but a garbage to them that they cannot throw away and are tolerating for blood relation."*

Outwardly, this insult seems inhumane and pessimistic approach but in reality, the researcher has found positive effects of this insult over addicts, as they found it heart wrenching, so they question their habit and reconsider the ways through which they can go back to their old lives full of honour and dignity. Another respondent aged 25 told that he wanted to regain lost power. Another respondent aged 26, almost described the same aspect of his life saying: *"People usually call me by names such as 'nashai' (drug addict) on my face."*

These remarks show how important is for individuals to maintain their good persona among the members of society. Bad reputation can cast a huge impact over their personality. Moreover, it was revealed that those who were admitted into the rehabilitation centre out of their own will were far more actively participating than those who were brought here by other family member or by coercion. These findings of research were confirming with the finding of Baumeister (2017).

### 5.2.2 *Family and Friends' Support*

Family is the basic institution where an individual learns to be affirmative to social standards of desirable behaviour. Drugs consumption alters brain's normal functioning and leaves an individual with impaired and distorted self-image. When the researcher asked the respondents, what made them to take decision of getting into drug treatment program, so more than a few aspects revealed on researcher, respondent aged said:

*"I remember my son getting scared over my fuming behaviour. I still have that timid glance in my mind."*

It was expressed by the respondent that he does not want to create that fear in the eyes of his kids anymore and want to secure them by giving a good life. It pushed him forward to seek treatment. Another respondent who was younger in age (18 years) told:

*"Sometimes, my parents used to tie me with ropes and chains at home to refrain me from using drugs. When they look at me screaming with pain, my mother secretly enters in my room and unleash me from chains. It kept on going the same for some time."*

He was a persistent source of fights at home which was certainly agonizing his condition. Individual's sense of guilt becomes a motivation to end the cycle of addiction by seeking treatment.

Love of children with their parents is a natural thing and it can certainly act as a motivational factor to change the life of an addict as it was revealed by the respondent aged 26:

*"She said that after divorce I was her only support and she did not want to be left alone after me." So, I got myself admitted to bring her joy back."*

Researcher found out that parents strained relations and divorce cast great negative impact on kids. Being a child who has always seen his parents fighting and eventually divorced could not be a better person. But it was his love for his mother that arose remorse in him for addiction and led to quitting. If parents and kids share a strong bonding then it can spur the feeling of responsibility. When an individual has a sense of responsibility towards family, he may take decision of quitting on drugs, as explained by the respondent aged 29:

*"Being eldest son, I am a direct influence over my siblings and family members. I don't want my siblings to look at me as a bad example."*

Love has always been a strong element in individual's life. Especially during the youth age, the influence of lover has been found quite pervasive as it has been described by the respondents during in depth interviews. A respondent aged 26 told: *"I want to scrap my ill habit of drug consumption to get accepted by her (lover) family."* This was highlighted by the response that individual with drug addiction still have high emotional reactions and can even

attempt on quitting drug if love someone. Another respondent informed: *“My parents have fixed my marriage with a beautiful girl. I am engaged and will be married soon.”*

It was clear from respondent's statement that he had a hope of future life that enlightened him to see addiction as evil and get rid of it. The researchers also found a respondent who was agreed to quit addiction just on the request of his lover.

Addiction where takes away many decent benefits from life, it also makes an individual vulnerable to insult. In Pakistani society addiction does hold a bad reputation as it was described by one of the respondents during interviews. He said:

*“My relatives were way too harsh with me and my family. They blame my parents of disorderly upbringing for my addiction. Though my parents are innocent.”*

Individuals find negative behaviours of family as disgusting and try to quit addiction to win back lost respect among their eyes. Another respondent who was suffering almost the same way described his experiences by saying: *“My friends who were non-addict and were leading a normal productive life were angry over me and isolated.”*

Being socially isolated is not less than a punishment as humans are social animal and requires bonding for effective continuity of life. It does affect him emotionally and psychologically therefore another respondent was also found holding the same perspective saying that he could not bear the disgusting and repulsive eyes anymore and wanted to get rid of it. It is because Pakistani society is not an individual based society and therefore being abandoned by the society members lead to sheer discontentment. Being accepted by the friend's and society is locus of a stable life and if addicts are met with social boycott it may either turn them to quit in addiction to get social bonding once again as supported by Caputo and Andrea, (2018) who hold that the relationships and good reputation is a part of positive motivational factors to quit addiction.

### **5.2.3 Incentive based Quitting**

Many respondents were seeking treatment because they have undergone some major financial crisis out of their addiction. They told that addiction yielded major loss in their financial life. They stopped going to earn money and were just spending saved money with both hands which eventually resulted in bankruptcy. The respondent aged 34, said:

*“I had experienced a major setback in my business with the advent of my drug addiction. I got bankrupt and became debtor. All this miserable condition tormented me to an extent where I decided to quit addiction of all types.”*

Though this incentive varies from individual to individual as one respondent aged 25, told:

*“I was promised by my elder brother that if I got better, he will set up a bike shop for me in village and I will be sent to village after completion of my program as villagers don't know my addiction, so they trust and respect me.”*

However, some had emotional incentive waiting for them after completion of treatment. It makes clear that monetary financial situation matters a lot. One can either be motivated to get better only if he finds prosperous chances in future or if he wants to regain lost success. Another respondent supported that incentive-based quitting but in a different way. He said:

*“My wife is pregnant with my daughter. I don't want her to be called by bad names that oh look here she is going the daughter of drug addict.”*

Emotional stability could also provide an incentive to leave addiction behind as the respondent wanted to secure respect for his daughter that can only be achieved if he quit addiction. Patients when provided with rewards or punishments whether in terms of emotional discomfort, lack of respect or monetary challenges they can use it as a driving force to change their behaviour. This phenomenon as explained by Noggle (2016) has once again been proven by this research.

#### **5.2.4 Physical Discomfort and Debilitation of Health**

Drugs not only impair one's senses but in long run also cause ailments as it contains toxic element. The respondents were found complaining about the deterioration of their health after prolonged consumption of drugs. One of the respondents told:

*"When I look in the mirror, I could see a yellow face with life less eyes and a man who might have been suffering from some deadly chronic disease."*

Health concerns almost every living human being, as informed by the respondents they could undoubtedly feel the difference in their health which was caused by the addiction. They were terrified by the scene of their terrible health issues ranging from simple nausea to severe headaches, restless heartbeat, loss of appetite and other effects. Another respondent also described somehow the same feelings:

*"One day I took cannabis, heroine and drank alcohol altogether. All these three drugs reacted so badly that I began to gasp air as my breath was choking. That was the moment that I realized how bad the drug reaction could go."*

In order to increase fun some respondents were found reporting about their adventures of making absurd concoctions of drugs to increase the ecstasy. According to respondents, drugs causes very appalling affects over one's health but still they can't stop using it unless they are provided with professional care. A respondent said:

*"I began mixing up things, loss my memory, my hands began shivering and even faint without consuming drugs. I had suffered from kidney pain due to excessive alcohol consumption. All these things were enough to create hatred for drugs."*

Negative effects over health can create hatred for drugs and may instigate the user to quit on addiction. It is said that health is a blessing and those who had once been ill could never deny it. Patients seeking help and quitting drugs out of health degradation was another aspect of research that was similar to already done research by Johnston (1998).

#### **5.2.5 Forceful Admission in Rehabilitation Centre**

Some respondents were admitted into the treatment program out of their own choice and being driven by their own set of motivations however others were forcibly taken to the rehabilitation centres against their choices. A respondent told:

*"I have been admitted here in this rehab centre by force. My mom called the faculty member of rehabilitation centre and they sent some security guard along with therapist who detained me from my home and took me with them."*

Though the researcher felt there was quite resentment in the eyes of respondent for being dragged to rehabilitation centre and was less motivated and efficient in quitting activities as it was reported by the therapist.

*“My mother lied to me while taking me here but when I got here, I did not resist because I understand that what she did was for my own benefit and if I had not been here than I would have been with other addicts endeavouring on some more noxious drugs. I am thankful to my mother for helping me in this turmoil of my life.”*

Contrary to the above respondent’s statement, this respondent was also brought here in treatment program by force but was now happy with his fate. It brings us back to the findings of Baumeister (2017) who suggested that those who exercise freewill perform better than those who are forced into something.

### **5.2.6 Decrease in Drug Efficacy**

Some respondents were quitting addiction because they no more find their drugs tasty or stimulating. Those individuals who have taken drugs with immense dosage and has tried every drug has now become immune to their taste and do not find it efficient enough to stimulate their senses. They are quitting because they are unable to feel pleasure, as on respondent informed:

*“I have been taking drugs for a while and now I have reached to the point where no number of drugs is enough for me to make me feel pleasurable. I increased dosage of drug that even put me in some serious health issues. All this promoted and strengthen my decision of quitting drugs.”*

Another respondent also supported this stance by saying:

*“Due to excessive use of drugs, my body got so accustomed that I lost all pleasure sensation from it which heightened my irritation. I want to end this addiction of mine, so, I could remain no more irritable and could enjoy a normal life.”*

### **5.2.7 Death of Relative out of Over Dosage of Drugs**

It is natural to learn lesson from others without actually imitating the behaviours. Some respondents had shown their fear of death that restricted their addiction. They reported that it was the fear of addicts before time death that opened their eyes to this grave situation. He said:

*“My uncle died due to heavy consumption of alcohol. After seeing him dying with utmost pain in front of my very own eyes I realized how troublesome my addiction actually is and I could possibly die before age like my uncle with agonizing pain.”*

Another respondent also shared the identical incident:

*“One of my apparently, healthy drug addict friend died out of over dosage of drug. His sudden death put a lot of pressure on my nerves and I went into major shock. I comprehended that if a healthy man could die without being ill then I am no exception to this addiction.”*

It can be understood that the fear of death was the triggering factor that made them quit addiction.

### **5.2.8 Promising Behaviour of Rehabilitation Staff and Therapist**

The most important factor that comes into play during quitting process is inside the rehabilitation centre. By the reviews of respondents, it was discovered that therapist

encouraging behaviour is way too important in either motivating or demotivating regarding addiction. The respondent said:

*“I truly appreciate the behaviour of all the therapist, counsellors and faculty members as they play a major role in keeping me here in this treatment. They do not stigmatize us but rather teaches us how to deal with negative comments of general public and how to put up with them.”*

Therapist with their effective behaviour can motivate individuals a great deal as after admitted into treatment program therapist and staffs is in constant and direct contact with patients. Another respondent also supported this dimension saying:

*“By learning others traumatic and painful stories and we gather more and more courage to leave this nuisance.”*

Above statement alongside of statements of other respondents pointed towards the impact of treatment effectiveness. An effective treatment program can not only help the individuals to quit addiction but can also create hatred for drugs for the rest of life if treatment is executed properly, As, it was told by another respondent:

*“I believe that 90% of the motivation an individual derive is from a good rehabilitation centre and better conduct of therapist. They always show concern but without making us ashamed. I acknowledge that I would not have changed my mind of quitting addiction if I had not been received with such welcoming and supporting therapist.”*

Behaviour of therapist and counsellors mark distinction among other aspects of rehabilitations life. When a patient is being welcomed and not judged for his actions it increases his wellbeing and solidifies productivity in him. However, not all the respondents in the centre were ready to quit on addiction. Some respondents had clearly refused to quit addiction even when they were admitted for the same purpose. Those respondents were not admitted to rehabilitation out of their own choice but rather being compelled by their relatives to join rehabilitation centre.

## 6. Discussion

The research findings of the current study are harmonious with literature review like the commonalities and differences between the quitting motivations of addiction. For example, Johnston (1998) highlighted the deterioration of health by consumption of drugs is an important factor in seeking treatment by the individuals. He also came up with the reason that physical damage plays a pivotal role in refraining them from further involvement of drugs. It was reported by the addicts that they were getting severe deterioration in their health and nausea, headache, vomiting alongside some serious ailments including kidney and stomach problems. However, there is also contrasting evidence to the findings of this study, as Menninger (1998) explained that addicts do not quit on addiction even though they clearly know that it can risk their life.

The current study reveals that there are two types of motivations that come into play during the quitting process of addiction. One is intrinsic in which the individual finds the source of seeking treatment within one's mind. However, the other one is driven by the pressure of others known as extrinsic motivation. *The researcher found* out that those addicted individuals who were brought into rehabilitation centres showed poor performance as they were not self-motivated and were living in those centres out of compulsion, conversely self-motivated addicts showed

higher success ratio on quitting behaviour. The researcher has also found support for this finding from the article of Baumeister (2017) who maintained that self-motivated individuals are more likely to perform actively because they derive strength to quit drugs from within themselves. The same findings of researchers have also been supported by Wild, Cunningham and Ryan (2006) who held the position of intrinsic motivation higher over coercion-based admission in treatment programs. Some individuals were also getting treatment because of the negative effects it has cast on their family and social life. They were quite embarrassed at the sight of domestic fights that their addiction caused. Respondents informed that no one was ready to trust them as others believe that those who consume drugs become instant liars. They reported that this loss of trust had broken them apart and they are seeking trust to regain that lost trust.

Financial loss is of great importance when it comes to quit addiction. The respondents said that due to over consumption of drugs they had lost interest in every other thing of their life and were not punctually dealing with their economic means. So, they either got fired or those who were running their own businesses embrace heavy loss which left them bankrupt. They are seeking treatment, so they may come back in their economic life and could support their families. Family is also of great importance; many respondents were found to quit addiction out of sense of responsibility that they feel for their family members. Some wanted to quit so their daughters or sisters could marry into some nice plus reputed family which was impossible with their addiction.

In most of the cases addicts were abandoned by their friend's and this feeling of desertion by addicts actually discloses that how strong social bond is found among the addicts and friends. They were quitting on addiction so that they could be taken back by their old friend's and could get conformity of other group members. This finding was directly in relation to the finding of Christakis and Fowler (2008) that discovered that individuals are more likely to quit in drugs if they found motivation from their peer group or if someone in their acquaintance is also seeking treatment to quit addiction.

Similarly, therapist plays a vivacious role in the quitting journey. It has been explored that if the behaviour of therapeutic staff is encouraging rather than criticising or of stigmatizing than it does cast a positive affect over the quitting motivations. Many respondents who were either self-motivated or were coercively brought to rehabilitation centre were deeply moved by the good and encouraging behaviour of their therapist. They reported to be more enthusiastic about treatment program due to therapist. However, some respondents even found resented over the treatment method and behaviour of therapist and showed averseness to quit addiction. The evidence of effectiveness and influence of treatment programs can also be found in the research findings of Melnick, Hawke and De Leon (2014). He held that community-based program holds more effect than residential based treatment programs.

Incentives given over change in desired behaviour has always been of great importance. Individuals who were provided with the fancy incentives were also highly motivated towards seeking treatment of addiction. There were multiple incentives found during research, some had the incentive of getting married to the desired girl they love, some wanted to open their bike shop, while other were optimistic about their social approval. They thought that after quitting on addiction they will regain their lost respect and acceptability among society. Contrary to above mentioned themes some respondents were also trying to quit so that they may become a good child of their parents and could take care of them. All this were provided researcher with multiple incentives that one can take on to quit. This finding also coincided



with the results by Noggle (2016) who maintained that if individuals are bestowed with significant incentive then they can alter their behaviour accordingly.

Additionally, addiction comes with conspicuous loss of control over one's self. Respondents were found reporting certain incidents of their lives that they would not have done if they were not intoxicated with drugs. One respondent told that he committed murder as he was unconscious due to drug consumption. Another informed that he had also opened fired on individuals but luckily no one got injured. Not only this but other respondents also came up with their stories of abnormal activities that were performed by them during their addiction phase. So, this loss of control over their action actually led them to quit addiction as they conceived of their repercussions. This was linked with the findings of Ghouchani et al. (2016) that held that negative consequences can also lead to quitting addiction.

## 7. Conclusion

Drug addiction is compulsive activity that increases the desirability of a drug in body to achieve the same previously experienced taste and state of mind. Initially it does lesser loss to body and life but later on its impact grow grave and resultantly destroy one's normal life. Therefore, it is necessary to see what factors could help in motivating the individuals to stop on addiction and also exploring the hurdles come in between.

Performance of those addicts who came here out of their own will was higher than those who were brought here by family or other coercions. It can be said that the family should consider the ways through which they can create hatred for drugs in the minds of addicts rather than directly using coercion on them as it may end up on negative consequences as researcher has found in the respondents who were by force admitted. Family members should also negotiate the time and procedure of seeking treatment rather than just imposing their own choice over them. As addicts are already struggling with their position in society so more pressure only turns things upside down for them.

Rehabilitation centre environment and therapist also play a significant role. If the centres chosen for the treatment are highly professional and actually make sure the unviability of drugs inside, then it can be of great worth for addict quieting behaviour. Many respondents were found complaining about the conditions of rehabilitation centre and lesser viability of required food by addicts which were playing a significant role in the hindrance to quitting process.

Underestimating the patient's attempt of quitting drugs at home or seeking professional help plays a negative role as addicts got heart broken and create acceptance for the stigmatization that they were already bearing and stop making struggle to quit addiction. Addicts who take proper treatment and quit on addiction relapse after they go home and revisit their old addict friend's or dealers. It is important to ensure that addicts should not get the chance to go back to their old places and Government should play their role in eradicating the evil from society.

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