



Quick survey on the effectiveness of the treatment process and identifying relevant factors affecting the relapse of drug for clients treated for Drug Abuse Disorders.

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Summary.

Currently Few treatment methods are carried out with respect to disorders regarding the utilization of drugs throughout the world and moreover in spite of the fact that whoever is being treated by the respective treatment processes concerning the usage of drugs, it was proved via the studies being conducted by social researchers that after being treated for the usage of drugs within a certain period of time, there is a propensity of becoming a drug addict afresh. It was further proved by the researchers that, there are multiple casual factors for the relapse of drugs. It is indeed vital to develop recovery capital for long-term recovery for the prevention of the utilization of drugs and moreover it is essential to identify the relevant recovery capital of the drug users. Under the above criteria, during 2017 and 2018 via the treatments and rehabilitation centers of the National Dangerous Drugs Control Board, survey was conducted regarding follow-up of the drug users who were being treated. In order to find out the facts related to psychological, social and environmental aspects which are able to have an impact on the usage of drugs, finding out yet again the success related to treatments offered to the users of drugs, impact that is able to be originated from the family once re-socializing for the usage of drugs after being treated, this respective study was decided to be conducted. Furthermore, this study was conducted for the purpose of inquiring on the reasons of re-entering into the usage of drugs, identifying the challengers faced by the drug users once re-socializing into the society after being treated for the usage of drugs and identifying the relevant impact of the psychological, social and environmental factors, studying the treatment services provided by the National Dangerous Drugs Control Board and offering suggestions and recommendations for more quality treatment method.

Under Stratified Sampling Technique (as ratio of 20%), during the 2017 to 2018 drug users who were being treated from the 4 treatment centers of the National Dangerous Drugs Control Board, 170 drug users were selected from Colombo, Gampaha, Kaluthara, Kurunegala, Galle, Mathara, Kandy, Mathale, Anuradhapura, Polonnaruwa, Puttalam districts.

Among the 170 individuals who were being studied and included in the sample were men and majority of the individuals being treated, that is 53 (31%) of them represented 21-30 age category. And further it was revealed that 10 (6%) of them represented below 20 age categories. Therefore, it is able to be identified that there is a propensity of obtaining treatments regarding the usage of drugs among the youth community.

Among the majority of the drug users being treated, that is 146 (86%) represented by Sinhalese, and 133 (78%) of them were Buddhists, 80 (47%) of them were married and 64 (38%) were educated from 6-10 grades. Therefore, it was proved that among drug users included in the sample being treated for drugs disorders majority represented tertiary education level.

When inquired on the treatments, rehabilitation services being taken by the drug users included in the sample, it was revealed that 170 (100%) of them gained treatment and rehabilitation services from the National Dangerous Drugs Control Board. Among them 59 (35%) of them had taken western medical treatments in someday, 23 (14%) of them had taken treatments from private centers, 16 (9%) of them had taken treatments from

government hospitals, 3 (2%) of them had taken treatments from Ayurvedic hospitals and 3 (2%) of them had taken Chinese acupuncture and Homeopathy treatments.

When inquired on the type of drug being taken for the last time by the drug users in the sample, it was proved that they were Poly drug users. Here among the 170 drug users included in the sample, 161 (95%) were treated for the usage of Heroine, 69 (39%) of them treated for Cannabis usage. Thus, majority were taken treatments for Heroine and Cannabis. In addition, 98 (58%) of them had taken treatments for Cigarette and 54 (32%) of them had taken treatments for Alcohol.

When inquired on the nature of admission for the treatments and rehabilitation services, it was revealed that 121 (71.2%) had taken treatments and rehabilitation services from their own will. In addition, as punishment given by the court, by the guidance from parents or family members and one drug user by the means of a concurrent officer, were revealed to obtain treatment and rehabilitation services.

When inquired on the quality of the rehabilitation given to the drug users, it was revealed that 100 (58.8%) said "Very Good" on the welcome that they received at their first arrival at the center, 99 (58.2%) said "Very Good" on the friendliness of the officers at the treatment center, 77 (45.3%) said "Very Good" on the cooperation given to them with regard to identification of hidden talents of them (drug users) by the officers at the center. And furthermore, 102 (60%) said "Very Good" on the relationship between the officers of the treatment centers and the drug users.

When inquired on the opinions and attitudes related to the internal environmental condition of the treatment centers, it was revealed, by taking opinions of drug users with respect to the internal environment, facilities and beautification of the environment, that 99 (58.2%) of them said "Very Good" on the space created in the internal environments of the treatment centers.

It was decided to offer vocational training by identifying the talents of the drug users included in the sample via this study. It was revealed that 111 (65%) of the drug users included in the sample were found out to be involving in vocational training of some sort during the treatment period. When inquired on the opinions regarding other training programs that is to be conducted in the training centers, they revealed further that it is necessary to provide, Motor Industry and Electronic training programmes, training programmes related to Masonry works and entertainment programmes,

When inquired on the relationship between family members and clients (drug users) before and after the treatments being taken, it was revealed that there was a minimum trust and acceptance towards the clients from the family members during the treatment period and moreover it can be noted a high attention and moderate condition in the attempt of socializing the clients by their family members as well.

After the rehabilitation among the recipients who were being socialized and free from the usage of drugs, it was proved by the answers given, that their recovery capital is able to be considered far better. Specially it can be noted an improvement in the recovery capital such as cooperation of the family, having protected housing environment, deprived of drug using friends, among the clients. After the rehabilitation, by changing the recovery capital gained from the society, it is proved that it is able to cause relapse of drugs among the recipients.

Among the factors impacted the relapse of drugs, psychological factors are able to be considered the most significant factors. when inquired on the most influential psychological factors among them that are able to cause relapse of drugs, it was revealed that for 69 (56%) out of 123 individuals, “self-Impact”, for 15 (12%) “isolation”, for 9 (7%) “failures of hopes” and for 8 (7%) “negative feelings” and “mental confusion”.

Among the social factors that are able to cause relapse of drugs, following can be identified as crucial. Among 123 clients, 50 (41%) of them possessed “peer pressure” as a social factor, 40 (33%) of them possessed “availability and abundance of drugs in the respective area” as a social factor and furthermore 38 (31%) of them experienced the fact that after being treated that they were compelled to be settled in the same place where they had an impact towards the usage of drugs as a social factor.

Among the 170 clients, 96 were obtained treatments from Nawadigantha treatment center located in Nittabuwa and moreover 21 (22%) out of 96 were completely cured from intoxication and terminate the usage of drugs. 33 of them obtained treatments for the last time from the treatment center located in Galle and among the same 33, 13 (39.4%) were completely cured from intoxication and be free from the usage of drugs. 24 were obtained treatments from western province treatments and rehabilitation center and 7 (29%) of them be free from the usage of drugs. 15 clients obtained treatments form Kandy youth treatment center and 6 (40%) of them completely become free from the usage of drugs. Moreover, follow-up was carried out for 76 (45%) clients and for 94 (55%) clients it was revealed that there weren't conducted any follow-up procedures out of the 170 clients.

1st Chapter

Introduction.

01. Study Background.

Usage of drugs can be defined as an addictive and chronic condition of illness. There are many casual factors that is able to have an impact on the usage of drugs and its persistence. Among them factors such as genetic, psychological, social and environmental factors are able to be considered the most important factors that has a significant impact on the usage of drugs. Owing to disorders related to the usage of drugs, individuals are confronting harmful health consequences and furthermore it was reported by the social researchers that consequently they tend to confront social stipulations caused by the usage of drugs as well. Since the usage of drugs is able to be impacted to the society and to the entire country within the economic, social and political spheres it was added to the epidemiological studies.

As stated by the World's Drugs Report in 2019, among individuals who represent 15-64 age category, it was reported that 275 million had utilized drugs at least once in their life time and furthermore 35 million were reported to be depressed by the disorders related to the usage of drugs. According to the estimated reports in 2017, it was described that 585000 were killed owing to the usage of drugs. Thus, the usage of drugs has become a threat to the healthy life of 42 million of the world population. And it was identified that there is a systematic progress in the usage of Methamphetamine or also known as ice in all regions of the world. (world's drugs report, 2019). This depicts the fact that the usage of drugs can have a direct influence on health creating harmful conditions thus it is necessary to conduct treatments for disorders related to the usage of drugs.

Few treatment methods are conducting for the disorders related to the usage of drugs and the clients who were rehabilitated by whatever treatment method, it was proved by the social researcher through studies being carried out that within a particular period of time, there is a tendency of falling in to the relapse of drugs. Facts that impacted the relapse of drugs were identified, through the respective studies. According to Hammerbacher & Lyvers, 2006, it was proved that psychological facts are able to be impacted for the relapse of drugs for individuals who were being treated for disorders related to the usage of drugs. it was further proved that Psychological facts such as pleasure, negative and positive thoughts, depression, anxiety, social pressure and mental disorders can be impacted for the usage of drugs. (Hammerbacher & Lyvers, 2006)

In addition, it was found out by the researchers that social factors can be impacted for the relapse of drugs for individuals who were being treated for the usage drugs and furthermore social factors such as Peer pressure, Group identity are able to be identified as the respective social factors that can have an impact on the usage of drugs.

According to the social context, within 2019, 3613 drug users were treated for the disorders related to the usage of drugs. Among them, 1161 (32%) of them obtained treatments from the treatment centers of National Dangerous Drugs Control Board. In addition, 735 (20%) of them from private treatment centers, 1036 (29%) of them from Kandakadu treatment and rehabilitation centers, 681 (19%) of them from prisons, were revealed to be treated. It is

evident that there is 19% increase in obtaining treatments regarding the prevention of the usage of drugs when compared to 2018. (Drugs Abuse Monitoring System, 2019).

It is indeed vital to find out that whether the clients who were being treated, has become free from the usage of drugs or else whether the drugs have been relapsed by the recipients. Moreover, it is imperative to find out the quality of the treatment method being used. In 2012, within the study related to the success of the treatment and rehabilitation process that was being given for the clients, conducted by the research division of National Dangerous Drugs Control Board, it was revealed that 36% of the clients had become free from the usage of drugs and furthermore variety of factors has impacted the relapse of drugs. (Collection of research articles, part 4).

It is imperative to develop Recovery Capital regarding long-term recovery from the usage of drugs after being treated from the treatment and rehabilitation centers. Thus, it is vital to identify the Recovery Capital related to drug users who have become free from the usage of drugs and re-entered in to the usage of drugs.

Therefore, in the above context, with respect to the treatments being given from the treatment and rehabilitation centers of National Dangerous Drugs Control Board to the respective clients it is expected to study the psychological, social and environmental factors that are able to be impacted to relapse of drugs, success regarding the treatment procedures given to the relapse of drugs, impact of the family when re-socializing in to the society, through this respective study.

1.2 Research problem.

It is expected to study the following stipulations through this respective study.

What are the relevant factors which are able to have an impact on the relapse of drugs after being taken treatments and rehabilitation by the drug users? What are the challengers faced by the clients when re-socializing in to the society? Is the treatment method effective?

1.3 Research Objective.

1. To identify psychological, social and environmental factors which are able to influence relapse of drugs after being treated for the usage of drugs.
2. To identify challenges faced by recipients after being treated for the usage of drugs, when socializing in to the society.
3. To study the effectiveness of the quality of the services given by the Board.
4. To provide suggestions and recommendations for effective treatment method.

1.4 Research method.

This study is based on the Survey method. Factors affecting the freedom of the usage of drugs among the drug users included in the sample in the respective research field and to measure the effectiveness of the treatment method, this respective study was conducted analytically by taking all the relevant indicators.

1.4.1 Research criteria.

Among the clients who were being treated from the 4 treatment centers belonging to the National Dangerous Drugs Control Board during 2017 and 2018, clients who reside in

Colombo, Gampaha, Kaluthara, Kurunegala, Galle, Mathara, Anuradhapura, Polonnaruwa, Puttalam, were selected to be studied and included them in the sample.

1.4.2 Selecting a sample.

Under the Stratified Sampling Technique, 170 (20%) clients were selected for the sample who obtained drug prevention treatments from the 4 treatment centers of the National Dangerous Drugs Control Board during 2017-2018.

1.4.3 Data collecting techniques.

Within the Survey that was conducted for the assessment of the quality regarding the treatments and the rehabilitation given to the clients, in order to collect the data of the clients and to necessitate the Factor Analysis, data was collected under factors that can impact the relapse of drugs regarding social, environmental, psychological, cultural and economic sectors. Quantitative and qualitative data was collected through structured questionnaires, in-depth interviews and observation method.

1.5 Data analysis.

It is decided quantitatively to measure the correlation between variables through Factor Analysis by utilizing SPSS software with respect to the quantitative/statistical data collected through structured questionnaire and moreover it is decided to analyze qualitatively the qualitative data collected through methods such as interviews and observations categorized by the respective individual characteristics.

1.6 Limitations and difficulties of the study.

When collecting data of the survey regarding the follow-up of the clients, it is out to be mentioned that field researchers were compelled to confront various difficulties. Specially despite the fact that, in order to conduct the survey, it was decided to select 181 clients who were being treated through treatment and rehabilitation centers of the National Dangerous Drugs Control Board in 2017, when conducting the study, due to being absent in the respective residential addresses of the selected clients by utilizing stratified sampling technique, clients who were being treated during 2018 were decided to be selected for the survey. Therefore, follow-up was carried out for nearly 550 clients, and among them, 170 clients were selected for the sample.

Absence of clients in their respective residential addresses, re-admitting in treatment centers or imprisonment, incorrect addresses given to the treatment centers by the clients, were considered to be the difficulties that can cause inability to offer follow-up.

2nd Chapter

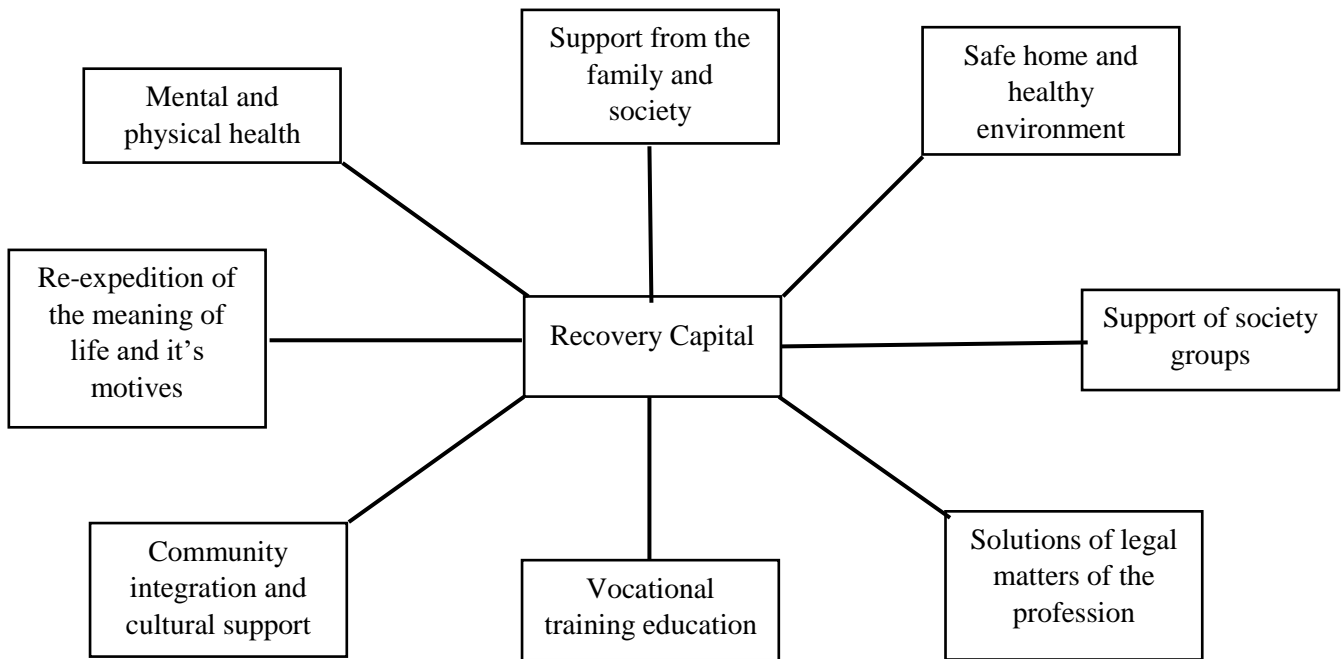
Drug treatment method in Sri Lanka.

Various treatment methods are carried out all over the world and the final result of all these treatments ought to be the freedom of the usage of drugs. Principles which ought to be included in the drug treatment method was mentioned by NIDA- National Institute on Drug Abuse. They can be presented as follows,

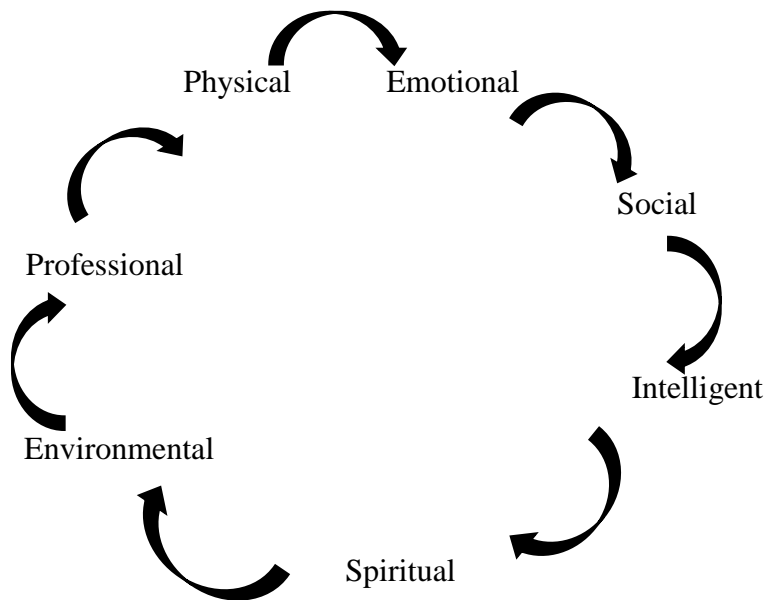
1. Although addiction is defined as a complex condition that is able to have an impact on the functioning of brain and behavior, it is a treatable disease.
2. Single treatment method is not suitable for everyone.
3. Treatments ought to be easily accessible to recipients.
4. In effective treatment method, capacity to address not only the usage of drugs but also multiple requirements of the clients ought to be developed.
5. Adequate time period of waiting ought to be sustained for treatment procedures.
6. Behavioral therapeutic methods (personal, family or group counselling) are considered the mostly utilized therapeutic method in drug treatment procedures.
7. Counselling and other behavioral therapeutic treatments, it is imperative to have medicinal treatments for the clients.
8. Continually it is necessary to estimate the treatment plan of the clients, and in order to certify the fulfilment of altering necessities of the clients, treatment plan ought to be reformed.
9. There could be other mental disabilities for clients who were addicted to drugs, and they ought to be addressed properly.
10. Intoxication is the first stage of drug treatment and furthermore it does not impact to long-term freedom from the usage of drug.
11. It is not needed to voluntarily attend to drug treatments for the effectiveness of the treatment procedures.
12. Clients ought to be tested medically for HIV, Hepatitis B and C and other infectious deceases and for the targeted groups, special methods ought to be instigated.

2.1 Effectiveness of including Psychological intervention method.

When offering the assistance to attain freedom from the usage of drugs in the drug treatment procedures, different time frames and procedures are able to be sustained. Owing to the fact that drug addiction is identified as a chronic disease, and moreover since there is high risk in the relapse of drugs, which is able to occur continually on a few occasions, it is considered a long-term process where intervention is done through multiple profiles and continuous attention is needed. Interventions of the multiple profiles can be stated as follows,



Source – Treatment for substance use disorder – 2015



Source – Treatment for substance use disorder – 2015

Through the treatment and rehabilitation centers of National Dangerous Drugs Control Board, treatments are conducted under the principle of psychological intervention. Here, especially behavioral therapeutic methods are being followed and through the behaviors that impacted the usage of drugs is able to be controlled and assisted. And thus, it is believed that it can re-rectify the erroneous behaviors which impacted the relapse of drugs and become free from the usage of drugs at the end. By creating attitudinal change, regarding the attitudes that have been built up within an individual through Incidents and conditions on the usage of drugs, it is believed that usage of drugs is able to be ended. That is through this intervention, it is believed that by changing the perceptive actions, it is considered to release the drug users from the attachments that can be affected for the usage of drugs.

Foundation of the Psychological treatment is able to be discussed under two main concepts.

1). Identify the actions of drug users, according to the identification or perception of the usage of drugs since their childhood.

Here even prior to the usage of drugs, according to the attitudes on drugs and related erroneous experiences created by the society and the social groups and through the improper value systems formed by them, individuals have a proclivity of re-using drugs continually. Through which individuals are able to be bound to the usage of drugs and live accordingly. Therefore, it is vital to let the individuals to re-rectify the erroneous perceptions of drugs in to rectified perceptions and furthermore, to change the thinking pattern of the usage of drugs, and by that according to the Psychological opinion it is able to be free from the relapse of drugs.

Moreover, owing to the continuous usage of drugs for years, it is able to become a common scenario. Therefore, it is imperative to offer ability and oppertunity to the drug users to carry out their normal day to day activities and their general actions in an environment, free from the usage of drugs. In the Psychological method, since it is able to question the day-to-day experiences and letting drug users to change their perception on the usage of drugs, it is helpful to be free from the usage of drugs.

2). Strengthening the individual personality.

Owing to weaknesses in the individual personality, individuals are able to become drug addicts and owing to the same reason, it is possible to have a lack of strength in the individual personality to avoid or become free from the usage of drugs. If the individual personality is powerful, there wouldn't be any relapse of drugs. for the weakness in the individual personality, apart from birth inabilities, nature of family, society, environment and economic factors are able to be affected. Due to the weaknesses in the personality, experiences faced during the period of the usage of drugs by drug addicts, following features are identified.

- 1). Loss of self-confident.
- 2). Loss of self-esteem.
- 3). Being pessimistic on every incident.
- 4). Not-accepting self-abilities and self-strengths.
- 5). Being captured easily by others.

6). Being pessimistic on future. (Marasinghe 2009: 61).

In Psychological treatment method, these conditions are identified and opportunity is given to progress them positively. Furthermore, within this treatment method following are included in order to expand the individual world,

- Expanding personal/individual world.
- Expanding the ways of entertainment.
- Expanding the ways and chances of recreation.
- Expanding the methods of enjoyment.
- Making involvement in creative activities.
- Introducing sports events and methods. (Marasinghe 2009: 61).

In the Psychological treatment method, treatment is conducted on the basis of individual and it is being concentrated on the Psychological theories as well.

- Psycho Analytical Theory.
- Cognitive Theory.
- Cognitive Behavioral Theory.
- Rational Emotional Theory.
- Behavioral Theory.

Moreover, the major tool that is being utilized here is Counselling. And the following methods are used,

- Individual Counseling.
- Group Counselling.
- Therapeutic Counselling.
- Family Counselling.
- Sexual Counselling.

2.2 Evolution of drugs treatments and rehabilitation method in Sri Lanka.

National Dangerous Drugs Control Board was established and initiated on April 9, 1984, Under the National Dangerous Drugs Control Act no. 11, 1984. Policy with respect to improper usage of drugs and controlling of the usage of drugs is implemented by the Board and responsibility to review the improper usage of drugs and controlling is similarly conducted by National Dangerous Drugs Control Board. As stated by the Act, national policy with respect to improper usage, prevention and control of drugs was prepared by the National Dangerous Drugs Control Board and furthermore it is implementing the necessary actions to solve the drug menace in the country.

Among the actions being implemented, conducting treatments and rehabilitations for drug addicts is mentioned to be a major action of National Dangerous Drugs Control Board which was established as a Constitutional Board under State Defense Ministry, and moreover, as claimed by treatment and rehabilitation subcommittee of the board in 1984, it was recommended to take necessary measures to rehabilitate the drug addicts.

Financial and material aids had been offered to various Non-governmental Organization who had been conducting the treatments and rehabilitation procedures, by National Dangerous

Drugs Control Board, prior to the treatment and rehabilitation procedures done by the board itself. As for examples, Sri Lanka Sumithrayo, Mel Medura, Mithuru Mithuro, Palmadulla, Sarvodaya, can be taken.

The first treatment programme which was initiated by the National Dangerous Drugs Control Board was a community-based treatment camp conducted for 10 days. During 1986, these treatment camps were conducted in areas where majority of Heroin users were found, and furthermore support was taken from the respective community. Through direct intervention of Board, these treatment camps were carried out in Colombo, Kandy, Galle, Kurunegala districts. Main features that are able to be witnessed in these camps are that these camps were carried out in the same area where heroin users had resided, the substantial contribution offered by the community, participation for treatments by their own will and volunteer service provided for these camps.

Since it was merely not felt adequate to maintain community-based camps to treat for drug users, in 1986, through the Project division that was established by United Nations Fund for the Prevention of Substance Abuse and the United Nations Development Program in collaboration with the Board, own treatment and rehabilitation programmes were planned to be initiated and as a result of that on October 15th in 1990, residential treatment programme was initiated by admitting 5 drug addicts. (Meth Sevana-Kandy). Likewise, the following treatment centers were established,

- 1991 – Mith Sevana, Unawatuna, Galle.
- 1991 – Seth Sevana, as Day Care center, Hokandara, Colombo District.

(Bandara, A. I, 2009: 37)

Later as a treatment service and residential treatment center, treatment procedures were prevailed. Consequently, by applying, experiences in accordance with 10 days community treatment camp, residential treatment programmes were prepared.

Special feature that can be witnessed in that treatment programme was that it was implemented under 3 stages. They are,

1. Pre-counselling programme.
2. Treatment and rehabilitation programme.
3. Follow-up programme. (Bandara, A. I, 2009: 37)

Through pre-counselling programme, the counselling programmes are carried out for the drug user and their family members and main intention of this programme is to prepare the drug user for the residential treatment.

Within the treatment programme, it is mandatory for the drug user to stay residentially for 21 days. Here the first week is confined for Detoxification. Moreover, medications are offered under medical supervision. Since it is believed that drug users are compelled to face physical discomforts owing to become free from the usage of drugs, offering medications within the first week is decided to be mandatory.

After the Detoxification procedure, the relevant drug user is being admitted to rehabilitation. During this time period, all activities are carried out according to a daily time schedule.

Furthermore, within this programme through activities such as, meditation, physical training, confirmation of motive, solving personal conflicts are carried out in an environment where drug users are unable to utilize drugs and by offering opportunity to involve in general activities deprived of the usage of drugs, rehabilitation procedures are conducted.

After 21-day time period, the drug user is released from the treatment procedures and since then follow-up programmes are conducted for one year. Intention here is to minimize the possibilities for the relapse of drugs and finding out current condition of the drug user being treated under the Board.

In 1993 the first residential treatment center that was being carried out by Sri Lanka Sumithrayo, was acquired by the National Dangerous Drugs Control Board accompanied by its respective staff. This center was established in Urapola, Gampaha district named as “Nawadigantha”. This center which was initiated under one year treatment programme and when taken over by the Board, it had carried out 3-month residential community featured programme

As an alternative treatment method that was being followed for the heroine users, introducing outpatient treatment method is considered a distinct turning point. In 1997 for Outreach programme, appointing a discrete manager is considered another explicit fact. Moreover, for treatment offered to Heroin users, as an entrance, dropping centers were decided to be initiated around areas of Colombo where majority of Heroin users were found.

As a significant phenomenon in the process of drug treatment, through Drug Addicts (treatment and rehabilitation) Act no.54, “compulsory treatment method” were introduced. Here the National Dangerous Drugs Control Board is specifically offering a worthy contribution.

In 2008, only residential treatment and rehabilitation programme for women who utilize Heroine which was considered a lacking necessity, was initiated in Nittabuwa, Nwadigantha treatment center and Psychological treatment methods were decided to be utilized.

Moreover, currently 4 institutions are carried out for the rehabilitations of drug users by National Dangerous Drugs Control Board.

- Handessa, Kandy Center.
- Unawatuna, Galle Center.
- Navadiganthaya, Nittabuwa, Center.
- Thalangama, Koswaththa, Center.

In these centers, on the basis of the types of drugs being taken and the time limit in which these drugs were taken, relevant treatment and rehabilitation course of actions were carried out.

3rd Chapter

Results and Discussion.

3.1 Social demographical profile of the after cared clients.

3.1.1 Residential areas of the clients / permanent residence.

When identifying the residential areas of the clients who were treated for Substance Use Disorder during 2017 and 2018 in Colombo, Galle, Nittabuwa, Kandy treatment centers belonging to National Dangerous Drugs Control Board, it is able to be exposed the prevalence of the relevant districts of the 170 clients who were studied, as follows. As stated by that, majority of the individuals being studied were identified as residing in Colombo and Gampaha districts of the Western province. Prevalence of the drug users can be shown according to the respective districts as follows,

Table No. 01 - Prevalence of the clients by districts.

District	Number of clients	%
Colombo	87	51.2
Gampaha	31	18.2
Kaluthara	11	6.5
Mathara	10	5.9
Anuradhapura	08	4.7
Galle	05	2.9
Kandy	05	2.9
Mathale	02	1.2
Polonnaruwa	08	4.7
Puttalam	01	0.6
Kurunegala	02	1.2
Total	170	100

Source: Field survey date, 2019

As stated by the above graph, it is evident that large number of drug users were found in Colombo and Gampaha districts. Due to the statistical report regarding the usage of drugs in 2019, it was revealed that large number of drug addicts were reported to be found from

Gampaha district in the western province and 919 were reported to be treated in the Colombo district. (statistical report related to Drugs, 2019).

3.1.2 Gender composition.

It was revealed that 170(100%) individuals who were being studied were men. During 2017 and 2018, majority of the drug users who were being treated were found out to be men and moreover, treatments and rehabilitations were being carried out for women as well. Nevertheless, it was found out to be difficult to study women who were being rehabilitated for the usage of drugs.

3.1.3 Age level.

When considering the age level of the clients who were being included in the sample and were treated for the usage of drugs, it was revealed that majority of them, that is 53 (31%) of them represented 21-30 age category. Furthermore, 47 (28%) of the clients represented 31-40 age category, 34 (20%) of the clients represented 41-50 age category, 26 (15%) of the clients represented above 50 age category and moreover it was found out that 10 (6%) of the clients represented below 20 age category.

As stated by the above information, it is evident that majority of the clients were revealed to be youth generation who represented 21-30 age category. Furthermore, it was evident that drug addicts who represented below 20 age category were also being treated.

3.1.4 Composition of ethnicities.

It was found out that majority of the clients who were being treated, that is, 146 (86%) of them represented by Sinhalese, 13 (8%) of them represented by Muslims and 11 (6%) of them represented by Tamils.

3.1.5 Composition of religions.

It was reported that majority of the clients, that is, 133 (78%) of them represented by Buddhists, 13 (8%) of them represented by Roman Catholics, 12 (7%) of them represented by Christians and 5 (3%) of them represented by Hindus.

3.1.6 Marital Status.

It was revealed that majority of the clients, that is, 80 (47%) of them represented by married individuals, 79 (47%) of them represented by unmarried individuals. Furthermore, 4 (2%) of the clients were found out to be divorced and 4 (2%) of the clients were revealed to be separated. Moreover, one person was found out to be widowed.

3.1.7 Education level.

Majority of the clients who were being studied, that is 64 (38%) of them achieved 6–10 grade education. 62 (37%) of them completed O/L and 18 (11%) of them completed A/L. in addition, 9 (5%) of them were found out to be uneducated, 14 (8%) of them achieved 1–5-grade education, 2 (1%) of them were found out to be Diploma holders and one individual was found out to be a Degree holder.

This shows that majority of the drug users who were being treated for Substance Use Disorder, completed up to tertiary level of education.

Table No.02 - Social demographical profile of the clients included in the sample

Social demographical factors	Number of clients being treated and rehabilitated	Percentage %
Gender (male or female)		
Males	170	100%
Age		
Below 20 years	10	5'9%
21 - 30	53	31'2%
31 - 40	47	27'6%
41 - 50	34	20%
Above 50 years	26	15'3%
Ethnicity		
Sinhala	146	85'9%
Tamil	11	6'5%
Muslim	13	7'6%
Religion		
Buddhist	133	78'2%
Hindu	05	2'9%
Islam	12	7'1%
Christian	07	4'1%
Roman Catholic	13	7'6%
Education level		
Uneducated	9	5'3%
Grade 1 - 5	14	8'2%
Grade 6 - 10	64	37'6%
O/L Passed and completed	62	36'5%
A/L passed and completed	18	10'6%
Diploma holder	02	1'2%
Degree holder	01	0'6%
Marital status		
Married	80	47'1%
Unmarried	79	46'5%
Living together	02	1'2%

Divorced	04	2'4%
Separated	04	2'4%
Widow	01	0'6%

3.2 History of the clients who were being treated and rehabilitated.

3.2.1 Various treatment procedures that affected to become free from the usage of drugs.

It was revealed that various treatment methods were utilized to become free from the usage of drugs and to be cured from Substance Use Disorders by the clients. Among the 170 drug users who were included in the sample were revealed to be treated and rehabilitated from the National Dangerous Drugs Control Board and in addition to that it was further revealed that other treatment methods were utilized by them as well. Accordingly, 170 (100%) individuals received treatment and rehabilitation procedures from the National dangerous Drugs Control Board. Among them it was reported that 59 (35%) of them obtained western medical treatments in someday, 23 (14%) of them obtained treatments from private treatment centers, 16 (9%) of them obtained treatments from government or private hospitals, 3 (2%) of them obtained Ayurvedic treatment methods, 3 (2%) of them received Chinese Acupuncture and homeopathy treatments, to become free from the usage of drugs.

It was revealed that among 59 clients who received western medical treatments (Not under hospitals), 15 (25%) of them received western medical treatments once to become free from the drugs usage, 14 (24%) of them received treatments twice, 8 (14%) of them received treatments thrice, 7 (12%) of them received treatments 5 times, 6 (10%) of them received treatments 10 times. Moreover, it was revealed that 1 individual received treatments 30 times, another 1 individual received treatments 7 times and remaining 1 individual received treatments through western medical treatment procedures.

To become free from the usage of drugs, it was revealed that among 23 drug users, 12 (53%) of them received treatments once, 6 (26%) of them received treatments twice, 2 (9%) of them received treatments thrice from private treatment centers. It was further reported that 1 individual received treatments 10 times, another received treatment 5 times remaining recipient received 4 treatments 4 times from private treatment centers.

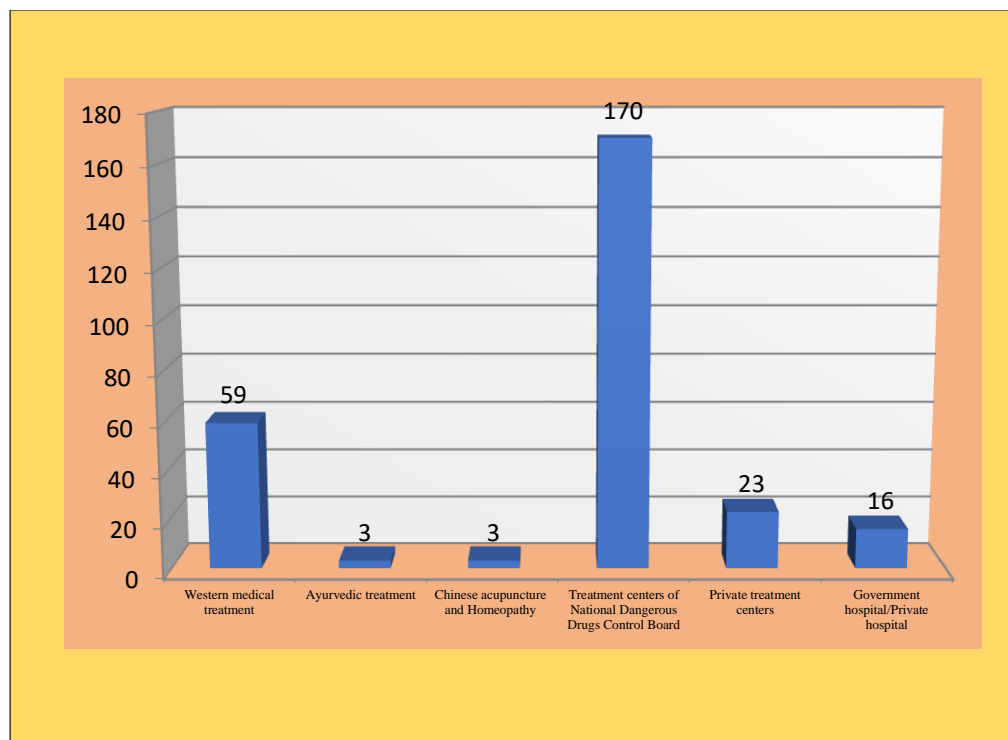
Furthermore, among the 170 (100%) recipients who were being treated from the treatment centers belonging to National Dangerous Drugs Control Board, 104 (61%) of the received residential treatments once, 38 (22%) of them received treatments twice, 20 (12%) of them received treatments thrice, 4 (2%) of them received treatments 4 times, 2 (1%) of them received treatments 5 times and 6times were revealed to be taken from treatment centers belonging to National Dangerous Drugs Control Board.

Among the 16 recipients who received treatments from government or private hospitals to become free from the usage drugs, 9 (56%) of them received treatments once, 3 (19%) of them received treatments twice and 2 (13%) of them revealed to be obtained treatments 4 times. In addition, 1 individual was reported to be receiving treatments thrice and another 1 individual was reported to be receiving treatments 5 times to become free from the usage of drugs from government or private hospitals.

To become free from the usage of drugs, among the drug users who received Ayurvedic treatments, it was revealed that, 3 (2%) of them received Ayurvedic treatments. And furthermore, it was revealed that another 3 (2%) of them received Chinese Acupuncture and Homeopathy treatments.

Therefore, it is proved that the drug users included in the sample had utilized various treatment methods to become free from the usage of drugs.

Graph No.01 - Different varieties of treatments received by the clients to become free from the usage of drugs.



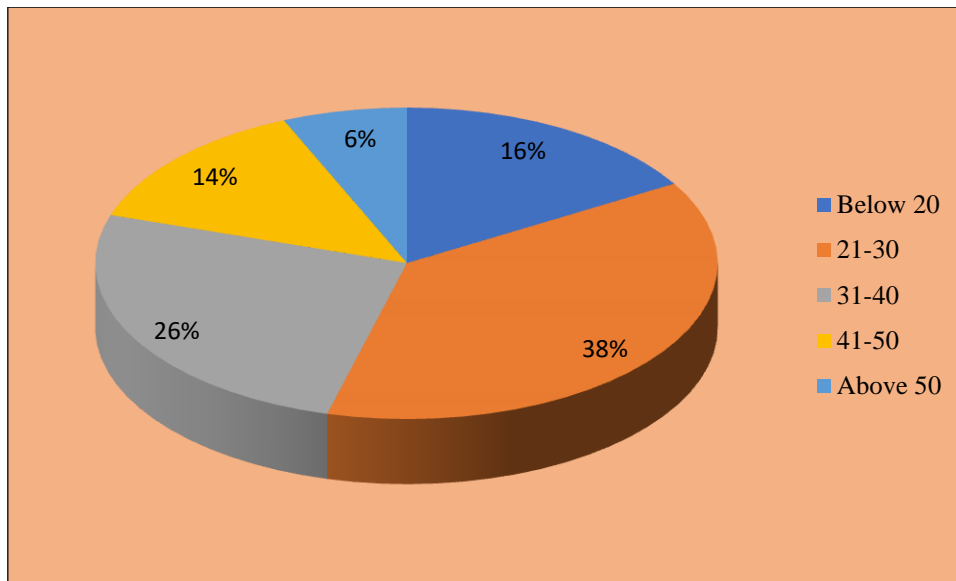
Source: Survey data, 2019

3.2.2 For the prevention of the drug usage, age level of the drug users when they were first admitted to treatments.

It was revealed that majority of the drug users included in the sample, that is 44 (38%) of them revealed to be obtaining treatments for the first time during 21-30 age category. In addition, 44 (26%) of them obtained treatments during 31-40 age category, 28 (17%) of them received treatments below 20 years, 23 (13%) of them received treatments during 41-50 age category were reported to be utilized drugs for the first time. In addition, 11 (6%) of them received treatments above 50 for the first time.

Therefore it is evident that drug users had received their treatments for the first time under 21-30 age category. Furthermore, it was revealed that individuals obtained treatments for the first time below 20 age category who represented the adolescent youth.

Graph No.02 - Age of the clients admitted for the treatment for the first time.



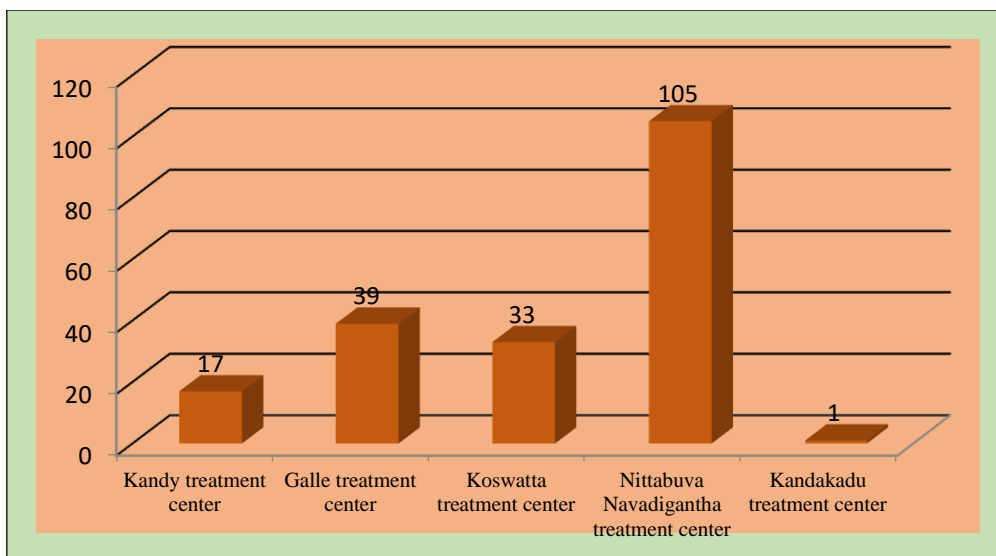
Source: Survey data, 2019

3.2.3 Treatment centers of the clients who were being treated.

When inquiring on the treatment centers where clients obtained treatments, it was revealed that 105 (62%) of them obtained treatments from Navadigantha treatment center, 39 (23%) of them obtained treatments from Galle treatment center, 33 (19%) of them obtained treatments from Thalangama treatment center, 17 (10%) of them received treatments from Kandy treatment center and 1 individual (0.6%) received treatments from Kandakadu treatment center.

Therefore, it was proved that majority of the clients obtained treatments from the treatment centers of the National Drugs Control Board.

Graph No.3 - Treatment centers where clients had received treatments and rehabilitations.



Source: Survey data, 2019

3.2.4 Type of drugs that impacted the last treatments being taken by the clients.

When inquire on the type of drug taken when the clients were last treated, it was proved that these drug users were Poly drug users. Here among the 170 clients, 161 (95%) of them received treatments for Heroine usage, 67 (39%) of them received treatments for Cannabis usage. Thus, it was proved that majority of them received treatments for Heroine and Cannabis. In addition, 98 (58%) of them received treatments for Cigarette usage and 54 (32%) of them received treatments for Alcohol usage.

3.2.5 Time frame in which the clients were finally treated.

When inquire on the time frame in which the clients were finally treated who were included in the sample, it was revealed that 65 (38%) of them obtained treatments for 2–3-month time period, 59 (35%) of them received treatments for 1–2-month time period, 24 (14%) of them received treatments for less than 2 weeks, 12 (7%) of them received treatments for 2weeks- 1 month time period and 10 (6%) of them received treatments more than 3 months.

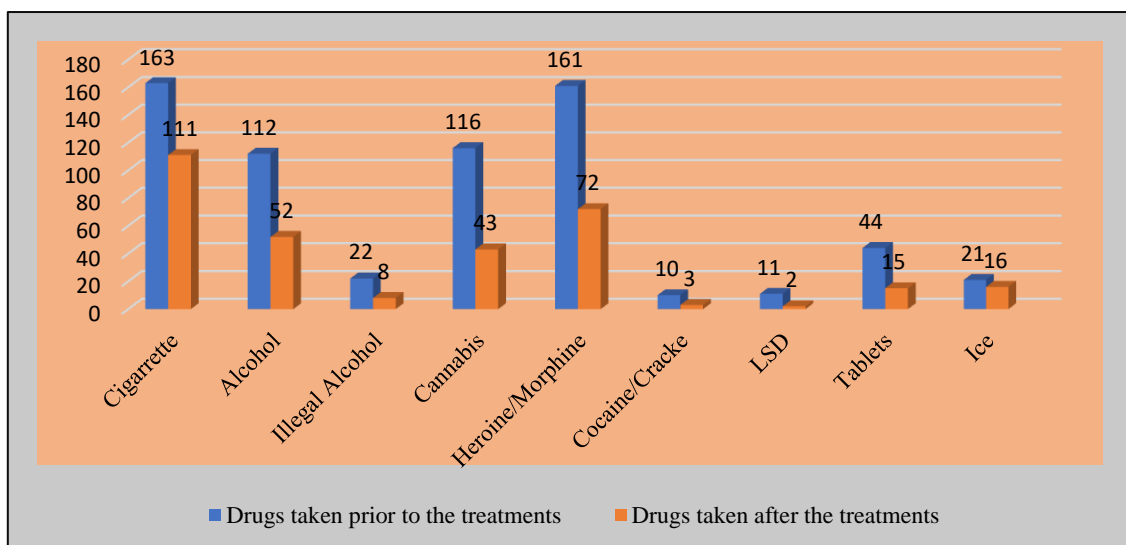
3.2.6 Types of drugs utilized prior to be treated.

When identifying the types of drugs utilized prior to be treated, among 170 clients, it was revealed that, 163 (96%) of them utilized Cigarette, 161 (95%) of them utilized Heroine, 116 (68%) of them utilized Cannabis, 112 (66%) of them utilized Alcohol, 44 (26%) of them utilized tablets, 21 (12%) of them utilized Ice and 22 (13%) of them utilized Illegal Alcohol.

3.2.7 Types of drugs being utilized after obtaining the treatments.

When inquiring on the types of drugs being utilized after obtaining treatments, it was revealed that among 170, 111 (65%) of them utilized Cigarette, 72 (42%) of them utilized Heroine, 52 (31%) of them utilized Alcohol, 43 (25%) of them utilized Cannabis. Furthermore, it was revealed that 16 (9%) of them utilized Ice, 15 (9%) of them utilized pharmaceutical drugs, 3 (2%) of them utilized Cocaine and 2 (1%) of them utilized LSD.

Graph No.4 - Drugs taken prior and after the treatment and rehabilitation process by the clients



Source: Survey data, 2019

3.3 Nature of admission for residential treatments.

When inquiring on the nature of admission for residential treatment and rehabilitations, it was revealed that 121 (71.2%) of them received treatments by their own will, 25 (14.7%) of them received treatments as a punishment offered by the court, 22 (12.9%) of them received treatments by the manipulation of parents or family member, (0.6%) one client received treatments through subject-related officer.

3.4 Effectiveness of the treatment and rehabilitation process.

When finding out the follow-up of the clients who were being treated and rehabilitated by National Dangerous Drugs Control Board, it was inquired on the quality of the treatments and rehabilitation course of actions provided to the clients. Here by utilizing Likert Scale method, quality of the treatment and rehabilitation processes were analyzed.

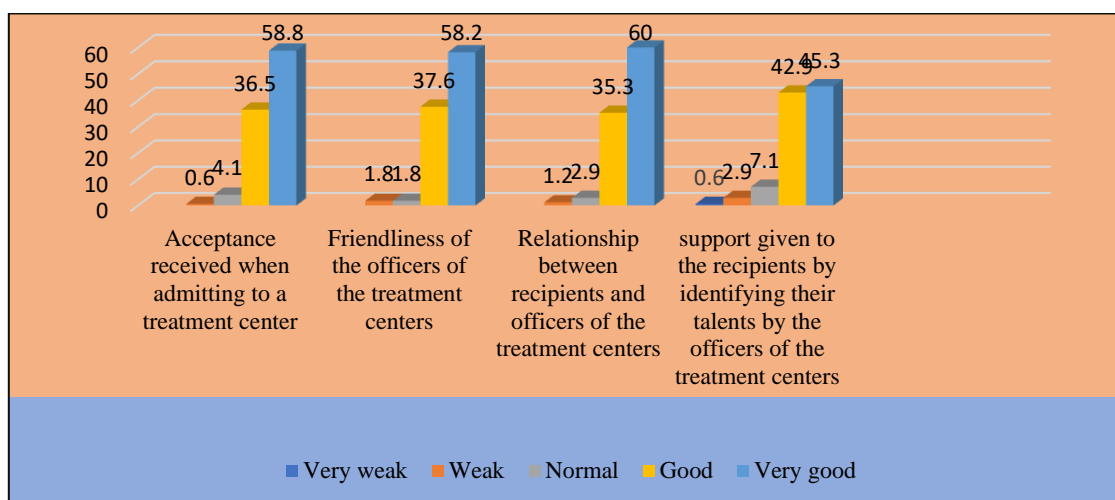
When inquiring on the welcome received once entered in to the treatment and rehabilitation centers by the clients, 100 (58.8%) of them mentioned, “very good”, 62 (36.5%) of them mentioned, “good”, 7 (4.1%) of them mentioned “normal” and furthermore one individual mentioned “weak”. Therefore, it is evident that welcome received by the clients when entering in to treatment centers was fairly in good condition.

When inquired on the friendliness of the officers who work at the respective treatment centers, it was revealed that 99 (58.2%) of the clients mentioned “very good”, 64 (37.6%) of them mentioned “good” and furthermore, 3 (1.8%) of them mentioned “normal and weak”.

When inquired on the relationship between clients and officers, it was found out that 102 (60%) of them mentioned “very good”, 60 (35.3%) of them mentioned “good”, 5 (2.9%) of them mentioned “normal” and moreover 2 (12%) of them mentioned “weak”.

When inquired on the support with respect to the enhancement of talents of the clients after identifying them which was offered by the officers at the treatment centers, 77 (45.3%) of them mentioned “very good”, 73 (42.9%) of them mentioned “good”, 12 (71%) of them mentioned “normal”, 5 (2.9%) of them “weak” and furthermore one client (0.6%) mentioned “very weak”.

Graph No.05 - Effectiveness of the treatment and rehabilitation process.



Source: Survey data, 2019

3.4.1 Opinions of clients with respect to the quality of the treatments.

When considering on the counselling and psycho educational programmes offered to clients when treated and rehabilitated for the usage of drugs, 89 (52.4%) of the clients mentioned “very good”, 76 (44.7%) of them mentioned “good” and furthermore 4 (2.4%) of them mentioned “normal”.

Therefore, as stated by the majority of the clients who were treated at the treatment centers, it is able to be clarified that counselling and psycho educational programmes which were being conducted at the treatment centers were fairly in a good condition.

When inquired on the support offered to clients regarding, becoming free of the preference related to the usage of drugs, 97 (57.1%) of the clients mentioned “very good”, 64 (37.6%) mentioned “good”, 7 (4.1%) of them mentioned “normal” and moreover 2 (1.2%) of them unanswered.

Thus, it is evident that high support was offered to clients to become free from the usage of drugs at the treatment centers.

When inquired on the support given to the enhancement of the relationship between the clients and their family members, it was revealed that 75 (44.1%) of clients mentioned “very good”, 80 (4.7%) of them mentioned “good”, (6.5%) of them mentioned “normal” and moreover (0.6%) one client mentioned “weak and very weak”.

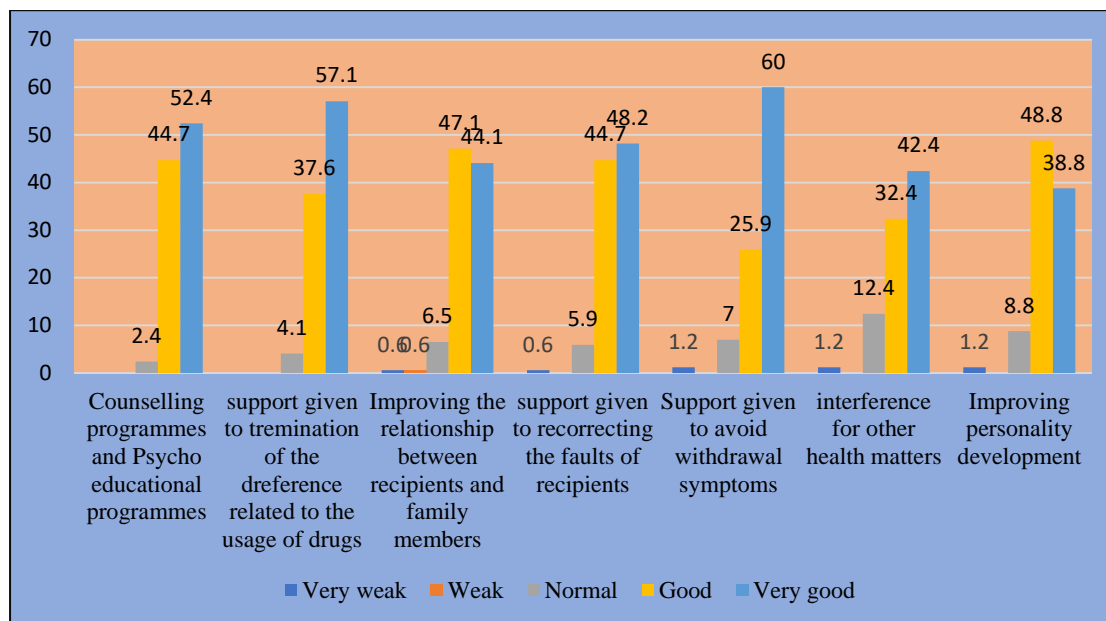
When inquired on the support given to recorrect the culpability regarding the addiction of drugs, 82 (48.2%) mentioned “very good”, 76 (44.7%) mentioned “good”, 10 (5.9%) of them mentioned “normal”.

Within the treatment process, when inquired on the support given to avoid the withdrawal symptoms by the officers at the treatment centers, 102 (60%) of the clients mentioned “very good”, 44 (25.9%) of them mentioned “good”, 13 (7.6%) mentioned “normal”, 2 (1.2%) of them mentioned “very weak” and furthermore 9 (5.3 %) of them did not reply.

When inquired on the interference offered to health matters of the clients by the officers at the centers, it was found out that, 72 (42.4%) of them mentioned “very good”, 55 (32.4%) of them mentioned “good”, 21 (12.4%) of them mentioned “normal” and furthermore 2 (1.2%) of them mentioned “very weak”. Therefore, it is able to be identified that fairly a worthy interference was given to the clients regarding their health matters by the officers at the treatment centers.

When inquired on the interference given to clients regarding the enhancement or the development of the respective personalities of the clients after the identification of personality problems of them, it was revealed that 76 (38.8%) of them mentioned “very good”, 83 (48.8%) of them mentioned “good”, 15 (8.8%) of them mentioned “normal” and furthermore 2 (1.2%) of them mentioned “weak”.

Graph No.06 - Opinions of the clients on the quality of the treatment process.



Source: Survey data, 2019

3.4.2 Opinions of the clients with respect to the internal environmental space of the treatment centers.

Opinions and attitudes of the clients who were being treated at the treatment centers, regarding the internal environmental space of the treatment centers were inquired. Here on the internal environment of the treatment centers, bedding facilities, and environmental beautification were inquired from the clients and 99 (58.2%) of them mentioned “very good” on the preparation of the internal environmental space, 49 (28.8%) of them mentioned “good”, 4 (2.4%) of them mentioned “normal”, 1 (0.6%) of them mentioned “weak” and furthermore, 13 (7.6%) of them were reported to be unanswered.

3.4.3 Condition of the sanitary facilities.

When inquiring on the sanitary facilities given to the clients, it was revealed that 119 (70%) of them mentioned “very good”, 45 (26.5%) of them mentioned “good”, 5 (2.9%) of them mentioned “normal” and 1 (0.6%) of them mentioned “weak”. However, it was evident as stated by the majority of the clients that the sanitary facilities were fairly in good condition at the treatment centers.

3.4.4 Quality of the foods and other arrangements offered at the treatment centers.

When inquired on the foods and other arrangements given to the clients at the treatment centers, majority of them, that is 118 (69.4%) of them mentioned “very good”, 44 (25.9%) of them mentioned “good” and furthermore, 7 (4.1%) of them mentioned “normal”.

3.4.5 Facilities offered for physical and mental development.

When inquired on the treatment programmes regarding the physical and mental development, 104 (61.2%) of them mentioned “very good”. Specially variety of programmes such as

programmes regarding domestic and open sports facilities, entertainment programmes and yoga programmes were introduced. And furthermore, it was revealed that 57 (33.5%) of them mentioned “good”, 7 (4.1%) of them mentioned “normal” and 1 (0.6%) of them mentioned “weak” regarding the respective programmes.

Thus, it is able to be identified that physical and mental development programmes offered to the clients at the treatment centers were fairly in an optimum level.

3.4.6 Vocational training and the skill developments.

During the treatment, by identifying the skills and capabilities/talents of the clients, vocational training that suits their skills and capabilities are offered at the treatment centers. And moreover, vocational training given to clients by identifying their respective capabilities who were included in the sample was also taken in to consideration. Therefore, it was revealed that, 111 (65%) of them had taken vocational training during the treatment period.

Among the 111 (65%) of clients who obtained vocational training, it was revealed that 66 (59.5%) of them had trained on making envelopes, 37 (33.3%) of them had taken training pertaining to agriculture, 18 (16.2%) of them had trained on making doormats, 16 (14.4%) of them had taken training related to electronics, 14 (12.6%) of them had trained on making brooms, 13 (11.7%) of them had taken motor industry training, 7 (6.3%) of them had taken training for coconut shell productions and moreover, it was revealed that 27 (24.3%) of the clients had taken several different vocational trainings.

3.4.7 Opinions of the clients on other training programmes which ought to be conducted at treatment centers.

When inquired on the ideas of clients regarding other training programmes, it was revealed that motor industry training, electronics training, masonry works, entertaining programmes ought to be progressed further.

04 Nature of the relationship between clients and their family members.

4.1 Nature of the relationship between clients and their family members prior to the rehabilitation.

In order to find out the nature of the relationship between clients who were included in the sample and their family members prior to the treatment and rehabilitation procedures being carried out, few facts were decided to be utilized. As the first fact, attitudes and trust of the family members of the respective clients regarding the usage of drugs, was taken and among the responses given, 52 (30.6%) of them mentioned “normal”, 45 (26.5%) of them mentioned “very weak”, 39 (22.9%) of them mentioned “weak”, 27 (15.9%) of them mentioned “good”, 5 (2.9%) of them mentioned “very good” and moreover, 2 (1.2%) of them did not reply.

According to the usage of drugs of the clients, it was revealed that the trust towards the clients by their family members had been minimized.

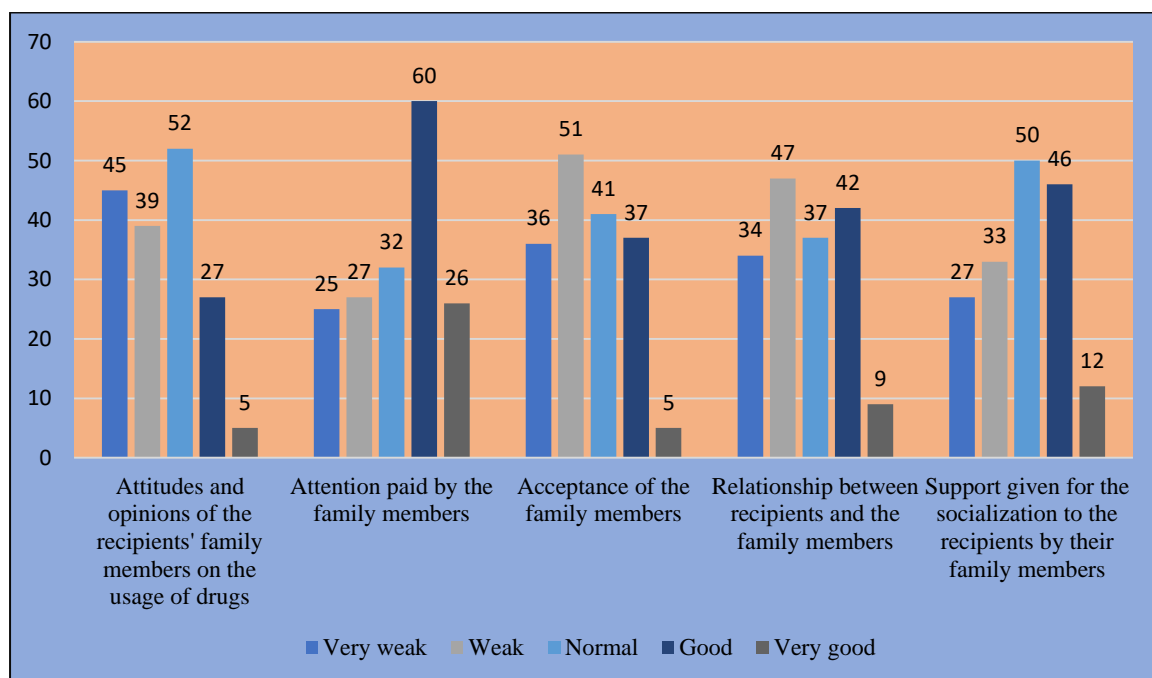
Furthermore, when inquired on the attention given to the clients by their family members, 60 (35.3%) of the clients mentioned “good”, 32 (18.8%) of them mentioned “normal”, 27 (15.5%) of them mentioned “weak”, 26 (15.37%) of them mentioned “very good” and 25 (14.5%) of them mentioned “very weak”. Therefore, it was evident that even prior to being rehabilitated, clients had received attention from their family members.

When inquired on the acceptance by the family members to the clients prior to being rehabilitated, 51 (30%) of them mentioned “weak”, 41 (24.1%) of them mentioned “normal”, 37 (21.8%) of them mentioned “good”, 36 (21.2%) of them mentioned “very weak”, 5 (2.9%) of them mentioned “very good”. Therefore, it was revealed that clients had received low acceptance from their family members prior to being rehabilitated.

When considering the relationship between clients and their family members, 50 (29.4%) of the clients mentioned “normal”, 48 (27.1%) of them mentioned “good”, 33 (19.4%) of them mentioned “weak”, 27 (15.9%) of them mentioned “very weak” and furthermore, 12 (7.1%) of them mentioned “very good”. It was identified that there was a moderate condition in the effort made by family members in socializing clients.

Therefore, when inquired on the nature of the relationship between the clients and the family members prior to the rehabilitation procedures, it was found out that there was a low trust and acceptance among the family members towards the clients, during the treatment and rehabilitation process, it was found out there was a high acceptance towards the clients and moreover, it was identified that there was moderate condition in the attempt made by family members in socializing clients.

Graph No. 07 - Nature of the relationship between the clients and their family members prior to the rehabilitation.



Source: Survey data, 2019

4.2 Nature of the relationship between family members and clients after the rehabilitation.

When inquired on the nature of the relationship between family members and clients after rehabilitation, above five indicators were decided to be utilized. Therefore, after the rehabilitation, when inquired on the attitudes and trust regarding the usage of drugs of the clients by their family members, 63 (37.1%) of them mentioned “very good”, 62 (36.5%) of them mentioned “good”, 25 (14.7%) of them mentioned “normal” and 10 (5.9%) of them

mentioned “very weak”. Therefore, it was evident that there was a good attitude and trust by family members regarding non-usage of drugs after the treatment and rehabilitation process of the clients.

Furthermore, when inquired on the attention paid for the clients by their family members, among 170, it was revealed that, 77 (45.3%) of them mentioned “very good”, 65 (38.2%) of them mentioned “good”, 5 (2.9%) of them mentioned “weak and very weak”. Therefore, it was proved that after the rehabilitation, there was fairly a worthy attention paid for the clients by their family members.

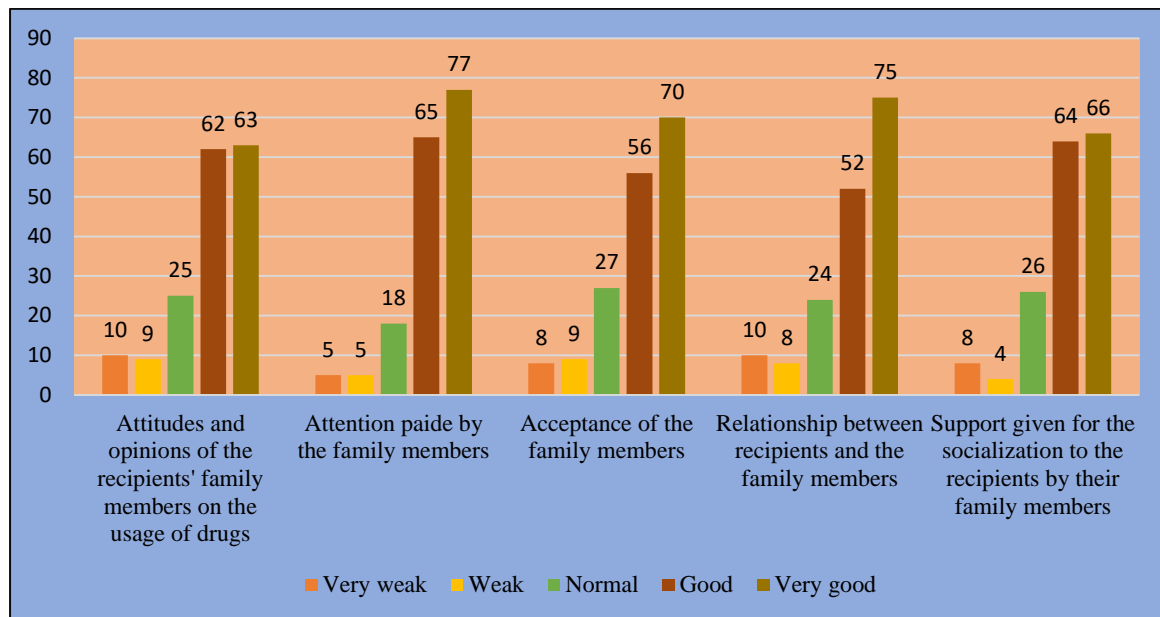
Moreover, when inquired on the acceptance given to the clients by their family members, 70 (41.2%) of them mentioned “very good”, 56 (32.9%) of them mentioned “good” and 27 (15.9%) of them mentioned “normal”. In addition, 9 (5.3%) of them mentioned “weak”, 8 (4.7%) of them mentioned “very weak”. Therefore, it was proved that after the rehabilitation there was a high acceptance among the family members towards the clients.

Furthermore, when inquired on the relationship between the clients and the family members, 75 (44.1%) of them mentioned “very good”, 52 (30.6%) of them mentioned “good”, 24 (14.1%) of them mentioned “normal” and 10 (5.9%) of them mentioned “very weak”. Thus, it was evident that there had been an optimum relationship between family members and the clients after the rehabilitation process.

When identifying the support given to clients in socializing them in to the society by the family members after the rehabilitation process, 66 (38.8%) of them mentioned “very good”, 64 (37.6%) of them mentioned “good”, 26 (15.3%) of them mentioned “normal”, 8 (4.7%) of them mentioned “very weak”, 4 (2.4%) of them mentioned “weak”. Therefore, it was proved that the attempt given for re-socializing the clients was more successful after the rehabilitation process by the family members.

Therefore, according to the above facts it was revealed the nature of the relationship before and after the rehabilitations being carried out between family members and the clients. Thus, it was revealed through the above data analysis that relationship between family members and clients after the rehabilitation was more improved than it was prior to the rehabilitation process.

Graph No.08 - Nature of the relationship between the clients and their family members after the rehabilitation.



Source: Survey data, 2019

4.3 Recovery capital of the clients who did not fall in to the usage of drugs.

It is imperative to utilize recovery capital to become free from the usage of drugs and for re-socializing them into the society. Through recovery capital clients are able to be recovered completely from the usage of drugs. Therefore, it is able to be proved, how much of recovery capital were utilized to become free from the usage of drugs by the clients included in the sample. Following is the condition of the recovery capital of 47 clients who were being treated and rehabilitated and become free from the relapse of drugs.

After the rehabilitation, among the 47 clients who have become free from the relapse of drugs, 39 (83%) of them revealed that they were more satisfied on the support given by the family. Furthermore, 7 (15%) of them revealed that they were “satisfied on it. 1 client however mentioned “unsatisfied”. For the indicator which is known as “protected housing environment”, 30 (64%) of the clients mentioned “most satisfied”, 6 (13%) of them mentioned “satisfied”, 5 (11%) of them mentioned “unsatisfied”, 3 (6%) of them mentioned “moderate” and “not satisfied at all”.

When inquired on not associating with friends who utilize drugs, among the 47 clients, 18 (38%) of them mentioned “most satisfied”, 12 (26%) of them mentioned “satisfied”, 9 (19%) of them mentioned “moderate” and furthermore 4 (9%) of the clients mentioned “unsatisfied”, 3 (6%) of them mentioned “thoroughly unsatisfied”. Therefore, it was proved that minimum number of clients associated with friends who misused drugs.

According to the involvement of vocational training, 11 (23%) of them mentioned “most satisfied”, 7 (15%) of them mentioned “satisfied”, 6 (13%) of them mentioned “moderate”.

In addition, 7 (15%) of them mentioned “most unsatisfied”, 4 (9%) of them mentioned “unsatisfied” and moreover 12 (26%) of the clients did not answer. Despite the fact that majority of the clients did not cooperate to offer answers, majority of the clients who replied

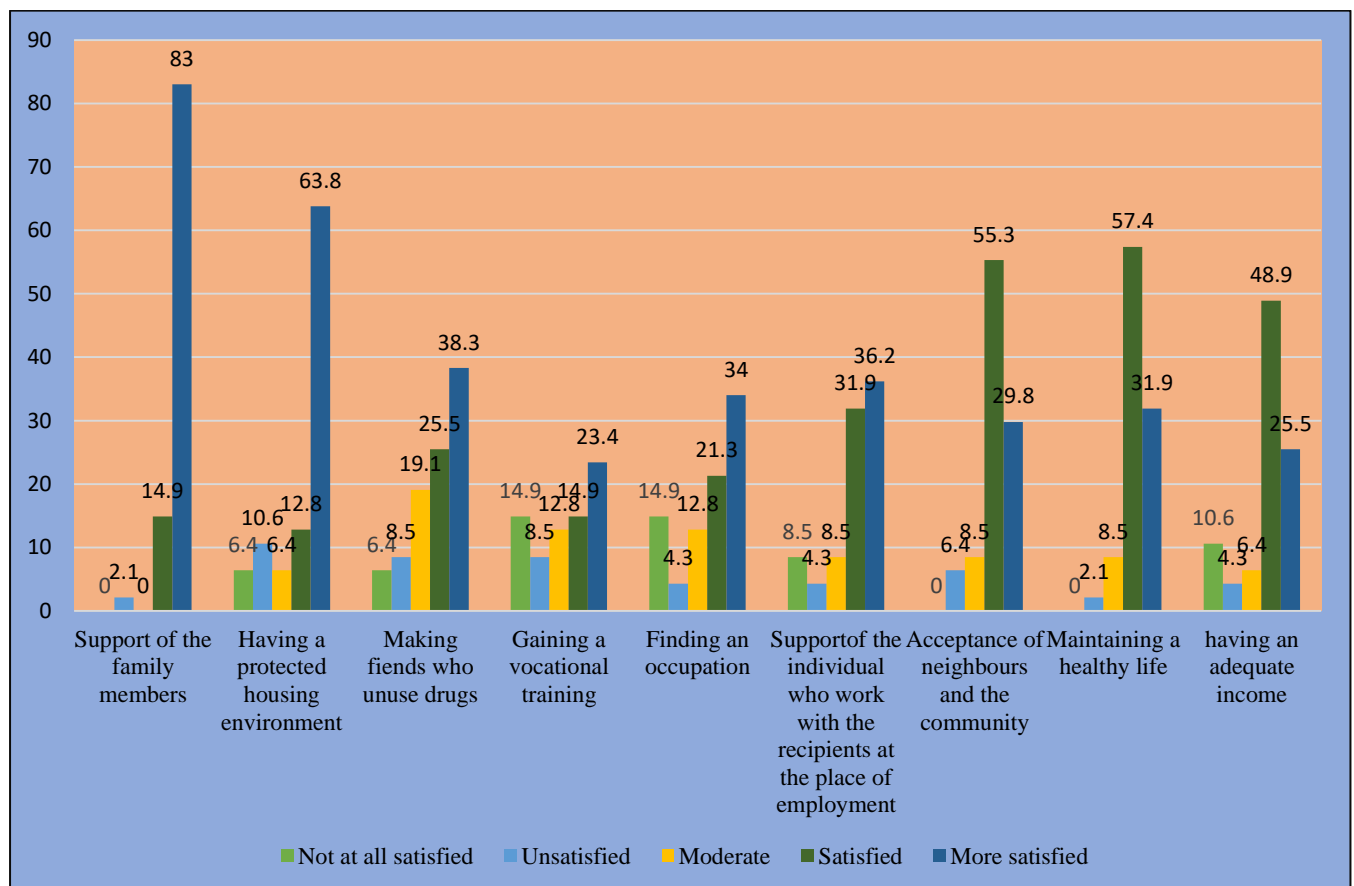
were satisfied by having a vocational training. Furthermore, when inquired on finding an occupation, among 47 clients, 16 (34%) of them mentioned “most satisfied” and 10 (21%) of them mentioned “satisfied”.

Furthermore, when inquired on the support and acceptance from neighbors and the community which were received by the clients after the rehabilitation, 26 (55%) of the clients mentioned “satisfied”, 14 (30%) of them mentioned “more satisfied”, 3 (6%) of them mentioned “unsatisfied” and 5 (11%) of them did not answer.

When inquired on maintaining a healthy life after the rehabilitation, 27 (57%) of them mentioned “satisfied”, 15 (32%) of them mentioned “more satisfied”, 4 (9%) of them mentioned “moderate”, 1 client mentioned “unsatisfied”. And furthermore, when inquired on obtaining adequate monthly income, 23 (43%) of them “satisfied”, 12 (26%) of them mentioned “more satisfied” and 5 (1%) of them mentioned “very unsatisfied”.

In line with the above facts, among the re-socialized clients after the rehabilitation, it was noted that clients who have become free from the usage of drugs have better recovery capitals and furthermore, it was evident that there was a progress in the recovery capitals such as receiving family support, maintaining and persisting protected housing environment, not involving with friends who misuse drugs.

Graph No.09 - Recovery capital of the clients who have become free from the usage of drugs.



Source: Survey data, 2019

4.4 Recovery capital of the clients who relapsed drugs after the rehabilitation.

There were 123 clients who misused drugs after the rehabilitation and among them, 59 (48%) of them mentioned “satisfied” regarding the support given by the family members, 31 (25%) of them mentioned “more satisfied”, 19 (15%) of them mentioned “moderate”, 7 (6%) of them mentioned “unsatisfied” and 6 (5%) of them mentioned “not satisfied at all”. Therefore, it was evident that despite the fact that these clients misused drugs even after the rehabilitation, support was still offered by their family members.

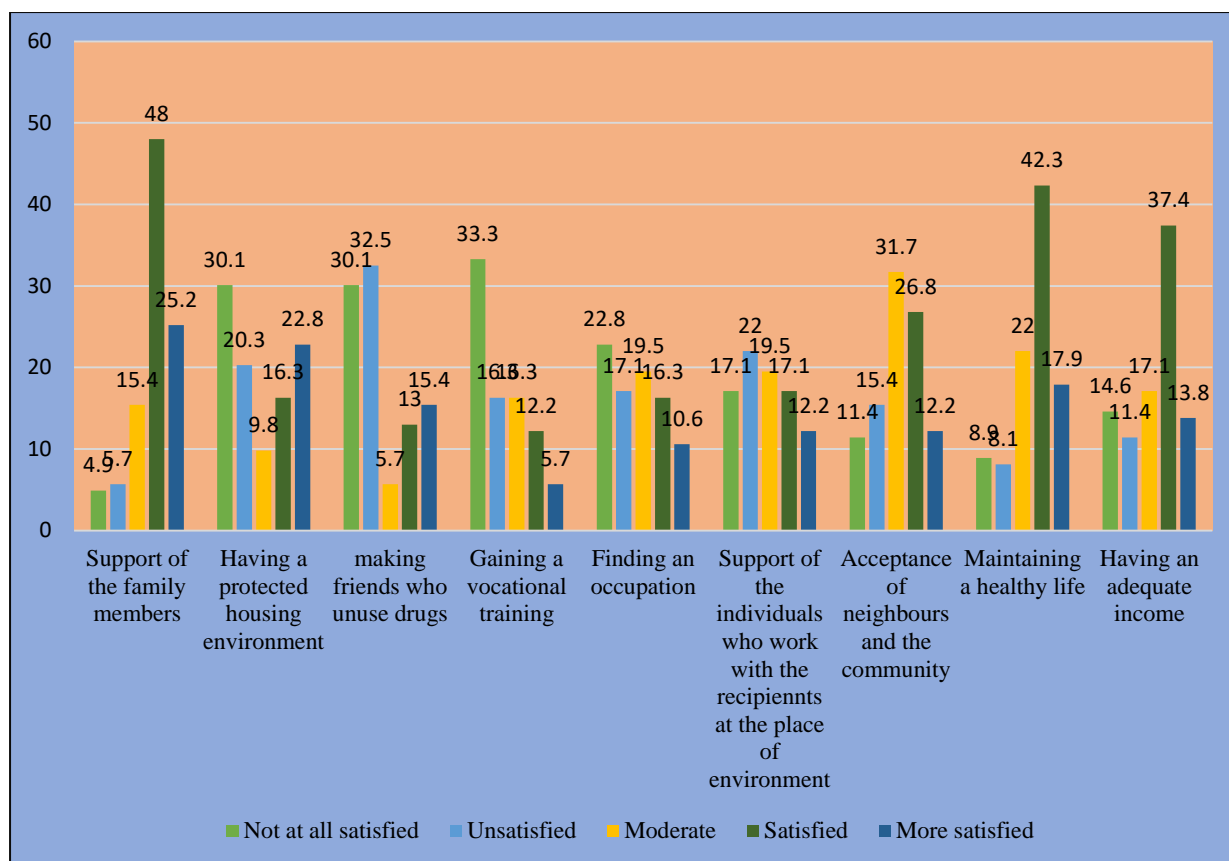
Although the family support was received by the clients, for the indicator of having a protected housing environment, 37 (30%) of the clients mentioned “not at all satisfied”, 25 (20%) of them mentioned “unsatisfied”, 28 (23%) of them mentioned “most satisfied”, 20 (16%) of them mentioned “satisfied”, 12 of them mentioned “moderate”. Therefore, it is able to be identified that majority of the clients did not have a protected housing environment.

Furthermore, for the indicator of not associating with friends who utilize drugs, majority of the clients, that is 40 (33%) of them mentioned “unsatisfied”, 37 (30%) of them mentioned “not at all satisfied”, 19 (15%) of them mentioned “more satisfied”, 16 (13%) of them mentioned “satisfied” and 7 (6%) of them mentioned “moderate”. Thus, it is able to be identified that, owing to the fact that clients involved in making friends who misused drugs, recovery capital of the respective clients had not progressed.

Moreover, for the indicator of having a vocational training, 41 (33%) of the clients mentioned “not at all satisfied”, 20 (33%) of them mentioned “unsatisfied”, 20 (33%) of them mentioned “moderate”, 15 (12%) of them mentioned “satisfied”, 7 (6%) of them mentioned “more satisfied” and 4 other clients did not answer. Therefore, it was revealed that, these respective clients had received vocational training or knowledge when re-socializing in to the society. Furthermore, as specified by the opinions of the clients regarding finding an occupation, 28 (23%) of them mentioned “not at all satisfied”, 24 (20%) of them mentioned “moderate” and 21 (17%) of them mentioned “unsatisfied”. Therefore, it was evident that these clients had received minimum opportunity in the recovery capitals such as obtaining vocational training and finding occupation.

Therefore, it is able to be concluded that after the rehabilitation, alterations in the recovery capital that was received from the society can have a manipulation over individuals to relapse of drugs afresh.

Graph No.10 - Recovery capital of the clients who relapsed drugs after the rehabilitation.



Source: Survey data, 2019

4.5 Commencement of the time period regarding the relapse of drugs after the rehabilitation.

4.5.1 Cigarette.

It was revealed that 123 clients had started to utilize different varieties of drugs after the treatment and rehabilitation processes. Among 123 of the clients, 111 of them were reported to utilize Cigarette. It was revealed that among 111, 40 (36%) of them after being treated, within 6-month time period had started to utilize Cigarette. 26 (23%) of them within below 1 week time period, had started to utilize Cigarette. Furthermore, it was reported that 15 (14%) of them within 2 weeks to 2months time period had started to utilize Cigarette, 9 (8%) of them within 1 week to two weeks' time period had started to utilize Cigarette, 5 (5%) of them within 6 months to 1 year time period had started to utilize Cigarette and moreover, 3 (3%) of the clients after 1 year time period, had started to utilize Cigarette.

4.5.2 Alcohol.

It was revealed that after being rehabilitated, 52 clients had started to utilize alcohol. Among them, 21 (40%) of the clients utilized within 1 month to 6 months' time period. Furthermore, 13 (25%) of the clients were reported to utilize alcohol within below 1 week time period, 8 (15%) of them had started to utilize within 6 months to 1 year time period and 2 (4%) of them had started to utilize within 1 to 2 weeks' time period.

4.5.3 Heroine.

It was revealed that after the treatment process 72 clients had utilized heroine. Among them 25 (35%) of them had started to utilize heroine within 1-to-6-month time period. 12 (17%) of the recipients had started to utilize within 2 to 4 weeks' time period and 11 (15%) of them had started to utilize within below 1 week time period.

In addition, 10 (14%) of the clients had started to utilize within 6 months to 1 year time period, 3 (4%) of them had started to utilize within 1 to 2 weeks' time period and furthermore, 5 (7%) of them had started to utilize within more than 1 year time period.

4.5.4 Cannabis.

It was revealed that 43 clients had started to utilize cannabis after treatment and rehabilitation process. Among them, 17 (40%) of the clients had started to utilize within 1-to-6-month time period. In addition, 7 (16%) of them had started to utilize within 1 to 2 weeks' time period, 5 (12%) of them had started to utilize within 2 weeks to 6 months' time period, 4 (9%) of them had started to utilize within 6 months to 1 year time period and 1 clients had started to utilize within more than 1 year time period.

4.5.4 Ice.

It was revealed that 16 clients had started to utilize ice after the treatment and rehabilitation process, among them, 5 (31%) of the clients had started to utilize within 2 to 4 weeks' time period, 3 (19%) of them had started to utilize within 1 to 2 weeks' time period and 1 client had started to utilized within below 1 week time period, within 1 to 6 months' time period, within 6 months to 1 year time periods. Moreover, 2 (13%) of the clients had started to utilize ice after 1 year time period.

After psychotropic and psychoactive treatment and rehabilitation process, 15 clients had started to utilize tablets. Among them 5 (33%) of them had started to utilize tablets within 1 to 6 months' time period, 4 (27%) of them had started to utilize within 2 to 4 weeks' time period, 2 (13%) of them had started to utilize within below 1 week time period. Furthermore, it was revealed that 1 client had started to utilize tablets within above 1 year time period.

4.6 Multiple factors affected the relapse of drugs.

After the treatment and rehabilitation process, there has been a possibility of drug users to entrap in to the relapse of drugs. Therefore, among 170 clients who were included in the sample, it was proved as specified by the study that was being carried out that 123 clients had utilized different types of drugs. Therefore, factor categorization was conducted and in it psychological factors, family factors, socio-environmental factors and other factors were included for expediency of study. Furthermore, most affected factors were identified.

Among the factors affected the relapse of drugs, psychological factors can be considered the most crucial factors. When inquired on the psychological factors, among 123 clients, 69 (56%) of them affected by “self-impact”, 15 (12%) of them affected by “isolation”, 9 (7%) of them affected by “breaking of hopes”, 8 (7%) of them affected by “negative thoughts and mental confusion”.

When inquired on the socio-environmental factors that can be influential to the relapse of drugs, among 123 clients, 50 (41%) of them affected by “peer pressure”, 40 (33%) of them affected by “abundance/availability of drugs in the respective area” and 38 (31%) of them affected by the manipulation which drives them to go to the same treatment and rehabilitation and to be treated and rehabilitated with same fellow clients.

Psychological and socio-environmental factors that can affect the relapse of drugs after the treatment and rehabilitation process are able to be summarized as follows,

Table No.03 Multiple factors affected the reuse of drugs.

Factors	Not very affected	Not affected	Moderate	Affected	Vey affected
Psychological factors					
1). Self-impact	12 (10%)	2 (2%)	7 (6%)	31 (25%)	69 (56%)
2). Negative feeling	56 (46%)	12 (10%)	16 (13%)	29 (24%)	8 (7%)
3). Isolation.	54 (44%)	17 (14%)	11 (9%)	23 (19%)	15 (12%)
Socio-environmental factors					
1). Influence of friends	31 (25%)	5 (4%)	11 (9%)	24 (20%)	50 (41%)
2). Abundance of drugs in the respective area	39 (32%)	2 (2%)	11 (9%)	31 (25%)	40 (33%)
3). manipulation which drives the clients to go to the same treatment and rehabilitation centers.	45 (36%)	7 (6%)	7 (6%)	23 (19%)	38 (31%)
4). Re-labeling them by the society	65 (53%)	29 (24%)	12 (10%)	5 (4%)	9 (7%)

Source: Survey data, 2019

Therefore, it is able to be proved that, there are multiple casual factors that can have an influence on the relapse of drugs.

After the treatment and rehabilitation process, clients are able to become free from the relapse of drugs. Thus, it was able to be revealed that 47 (28%) of the clients entirely have become free from the usage of drugs. Furthermore, 32 (19%) of the clients were reported to be utilizing only Cigarette and Alcohol and 91 (53%) of the clients were revealed to be utilizing Heroine and other type of drug.

4.7 Factors affected, becoming free from the relapse of drugs after the rehabilitation.

As Factors affected becoming free from the relapse of drugs for the 47 clients, it can be identified that 12 (25.5%) of them became free from the relapse of drugs owing to knowledge and attitudes received from the treatment and rehabilitation centers, 12 (12.5%) of them became free from the relapse of drugs owing to comprehension of the harmful consequences of the usage of drugs, 8 (17%) of them became free from the usage of drugs owing to the concern of their family members, 3 (6.4%) of them became free from the usage of drugs owing to the fear of humiliation and insult that can be generated from the society, owing to understanding their offence, owing to strengthening of their mind. Furthermore, 2 (4.3%) of the clients became free from the usage owing to changing of the environment, 2 (4.3%) of them owing to the difficulty of buying drugs, 1 (2.1%) of them became free from the usage of drugs owing to the concern of economic status and occupation.

Therefore, it was evident that, after treatment and rehabilitation process, multiple casual factors affected to become free from the usage of drugs

05. Treatment centers where clients were treated and rehabilitated for the last time and the condition of becoming free regarding the usage of drugs.

Among the 170 clients included in the sample, 96 of them received treatments from Navadigantha treatment center for the last time. And moreover, 21 (22%) of them completely became free from the usage of drugs and 18 (19%) of them started to utilize Alcohol and Cigarette. In addition, 57 (59%) of the clients were reported to be relapsing drugs.

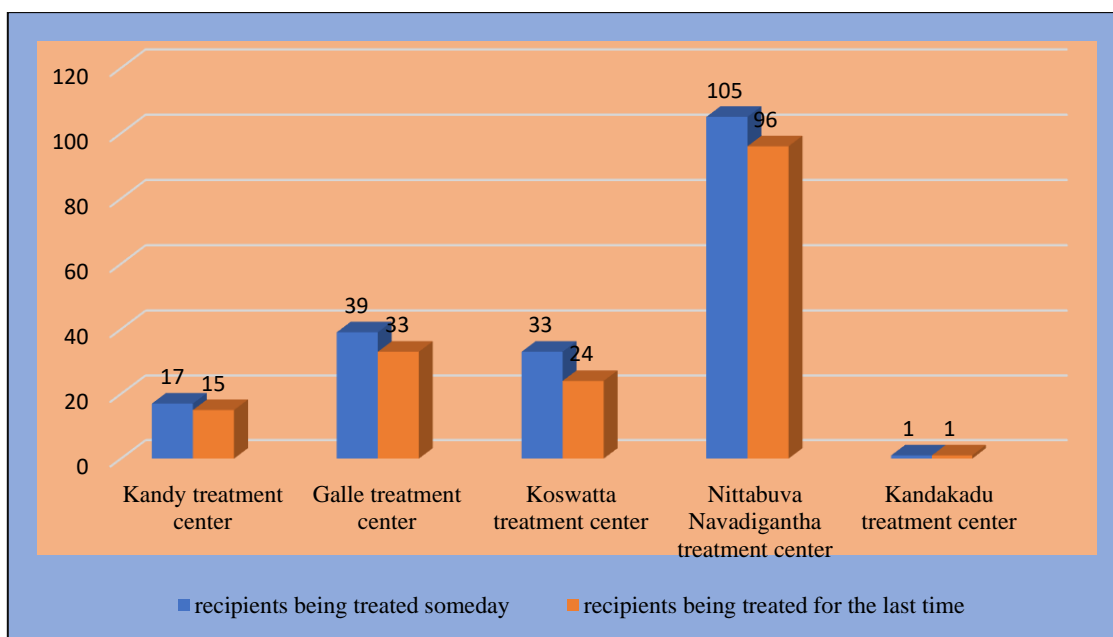
33 clients received treatments from Galle treatment center for the last time and moreover 13 (39.4%) of them became free from the usage of drugs. 6 (18.2%) of them started to utilize only Cigarette and Alcohol and 14 (42.4%) were revealed to be relapsing drugs.

24 clients received treatments from Western province treatment and rehabilitation center (Thalangama) for the last time and furthermore, 7 (29%) of them became free from the usage of drugs. 7 (29%) of them started to utilize Cigarette and Alcohol. And 10 (42%) of them were reported to be relapsing drugs.

Furthermore, 15 clients received treatments from Kandy youth prevention, treatment and rehabilitation center for the last time 6 (40%) of them became free from the usage of drugs, 1 (7%) of them started to utilize Cigarette and Alcohol. Moreover, 8 (53%) of the clients were reported to be relapsing drugs.

In addition, 2 clients received treatments from private treatment center and Kandakadu treatment center. Two of them were reported to be relapsing drugs.

Graph No.11 - Treatment centers where the clients being treated someday and for the last time



Source: Survey data, 2019

06. Time period of being treated and rehabilitated for the last time and becoming free from the usage of drugs.

Among the 170 clients, 47 of them became free from the usage of drugs and among them 24 (51%) of the clients received rehabilitation for 2 to 3 months and moreover 16 (34%) of them received treatments for 1 to 2 months. 6 (13%) of the clients received treatments for less than 2 weeks and 1 (2%) of them received treatment for more than 3 months.

After the rehabilitation, among the 32 clients who started to utilize Alcohol and Cigarette, 12 (38%) of them received treatments for 2 to 3 months, 11 (34%) of them received treatments for 1 to 2 months, 6 (19%) of the clients received treatments for less than 2 weeks. Moreover, 2 (6%) of them received treatments for 2 weeks to 1 months and 1 (3%) of the clients received treatments for more than 3 months.

07. Assessment of the non-usage of drugs.

7.1, Assessment of the external appearance of the clients.

In order to find out that there could be a risk in the relapse of drugs after being treated and rehabilitated, few data were taken from the clients in the sample under several indicators.

When estimating the 47 clients who have become free from the usage of drugs after the rehabilitation, external appearance of the clients was detected based on the researcher's observation. Here it was noted that clients who became free from the usage of drugs, tend to be clean and neatly dressed, beard and hair being cut neatly, face being washed properly and teeth being brushed well, taking daily bathing, and frequent usage of mobiles.

7.2 Assessment of attitudes related to the usage of drugs.

When inquired on the attitudes concerning the preference regarding the usage of drugs, several statements were offered by the clients and which can be mentioned as follows. Among the 47 clients who completely became free from the usage of drugs, for the statement "craving to be used", 38 (81%) of the clients mentioned "not agree", 1 (2%) of the clients mentioned that "do not agree to a certain extent", 5 (11%) of the clients mentioned "moderate", 3 (6%) of them mentioned "do agree to a certain extent".

For the statement "inspirational feeling coming from the memory of the pre-usage of drugs", 39 (83%) of the clients mentioned "not at all agree", 4 (9%) of them mentioned "moderate", 3 (6%) of them mentioned "not agree" and 1 (2%) of them mentioned "agree".

Therefore, when estimating whether the clients who were being treated tend to have the possibility of relapsing drugs, it can be concluded that their mental status was at a high level.

Furthermore, for the statement, "craving for the use of drugs when witnessing other individuals using drugs", 40 (85%) of them mentioned "not at all agree", 5 (11%) of them mentioned "moderate" and 1 (2%) of them mentioned "agree".

Moreover, for the statement, "possibility of having sexual intercourse for a long time", 35 (75%) of them mentioned "not at all agree", 6 (13%) of them mentioned "moderate", 2 (4%) of them mentioned "not agree" and 1 client mentioned "agree to a certain extent".

7.3 Estimation regarding the construction of social relationships of the clients.

Since social relationships can influence the relapse of drugs for clients who were being treated and rehabilitated, it was inquired that there could be a risk in constructing social relationships for clients which could enforce them to the relapse of drugs even after the treatment and rehabilitation process being completed. For the statement "involving in a relationship with drug users", 34 (72%) of them mentioned "not at all agree", 6 (13%) of them mentioned "moderate", 3 (6%) of them mentioned "not agree", 3 (6%) of them mentioned "agree" and 1 client did not answer.

08. Follow-up of the clients who were being rehabilitated.

Since after being treated for disorders related to the usage of drugs and drug users could re-enter in to the same harmful environment, there could be a high risk of relapsing drugs. Thus, after the treatment and rehabilitation process, follow-up was carried out for the respective clients. Through the means of that actions were implemented to minimize the chances which enforce clients to the relapse of drugs. Furthermore, it was being focused in international recognitions as well.

Therefore, follow-up was carried out for clients who are being treated and rehabilitated. Follow-up process was carried out by the Outreach officers. Therefore, among the 170 clients who were included in the sample, it was revealed that 76 (45%) of them were followed-up and moreover 94 (55%) of them were not followed-up.

Therefore, it was noted that follow-up was not carried out for majority of the clients who were being rehabilitated and furthermore reasons affected the above fact were inquired from the clients included in the sample, 72 (77%) of them mentioned that the Outreach officers did not attend to their residence or relevant field, 3 (3%) of them mentioned that they were absent in their residence by the time that the Outreach officer had attended to it and 19 (20%) of them didn't answer.

When inquired on the time period that the Outreach officers had attended to the follow-up activities, it was revealed that follow-up services were conducted for 2 to 4 weeks for 43 clients, for 21 (28%) of the clients follow-up was carried out for 1 to 6 months, for 6 (8%) of the clients' follow-up was carried out for 1 to 2 weeks and for 3 (4%) of the clients follow-up was carried out for more than 6 months.

Therefore, it was evident that for the majority of the clients, follow-up was carried out for 2 to 4 weeks' time period.

8.1 Services offered by the Outreach officers.

When inquired on the services regarding the follow-up processes that the Outreach officers offered to the clients, among the 76 clients, 70 (92%) of them mentioned counselling sessions were offered by the Outreach officers, in addition, 56 (74%) of them mentioned discussions and counselling were carried out to family members by the Outreach officers, 5 (7%) of them mentioned that they were offered the vocational training by the Outreach officers, 2 (3%) of them mentioned medical treatments were recommended by the Outreach officers and 2(3%) of them mentioned that they were offered other services by the Outreach officers.

Therefore, it was evident that services such as counselling, family counselling, vocational training were offered to clients in the rehabilitation process carried out by the Outreach officers.

8.2 Follow-up and becoming free from the usage of drugs.

After the rehabilitation, Outreach officers attempted to prevent the usage of drugs through follow-up activities. For the follow-up services carried out by the Outreach officers, situation of becoming free from the usage of drugs was inquired. Here among the 76 clients, 26 (34%) of them became free from the usage of drugs and 10 (13%) of them have utilized Alcohol and Cigarette. 40 (53%) of them relapse drugs.

4th Chapter

Conclusions and suggestions.

Conclusions.

1. Majority of the clients who were treated and rehabilitated for the disorders related to the usage of drugs, found out to be residing in the Colombo district of the western province
2. Majority of the clients who were being treated and rehabilitated represent 21-30 years of age.
3. All of the clients were treated and rehabilitated through National Dangerous Drugs Control Board and in addition multiple treatment methods were followed by them.
4. Majority of the clients were treated for Heroin and they were found out to be poly drug users.
5. There was a propensity in the preference of admitting to residential treatment procedures.
6. Majority of the clients were satisfied of the treatment and rehabilitation process carried out by National Dangerous Drugs Controls Board.
7. By identifying capabilities/talents and skills of the clients vocational training was offered through National Dangerous Drugs Control Board.
8. More interference of family members was received by the clients after they were being treated and rehabilitated than that of prior to the treatment and rehabilitation.
9. For becoming free from the usage of drugs, recovery capital was taken more or less and furthermore it was directly influenced to become free from the usage of drugs.
10. It was revealed that after the treatment and rehabilitation process, psychological, social and environment factors impacted for the relapse of drugs.

Suggestions.

1. New scientific methods ought to be applied for a quality drugs treatment and rehabilitation method.
2. More chances with respect to new vocational training ought to be offered to clients by identifying their skills and talents.

3. Improvement of the development of family relationships of clients ought to be made in order to sustain their recovery.
4. By determining the indicators for the preparation of recovery, systematic mechanism ought to be made for the determination of recovery and appreciation.
5. After being treated and rehabilitated, continuous follow-up procedures ought to be carried out and necessary services for the clients by maintaining a proper coordination with the relevant institutions ought to be offered, by the interference of Outreach officers.