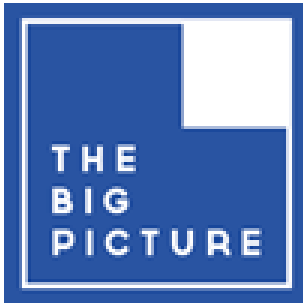


Policy Brief 1



PATHWAYS TO RECOVERY: INFORMING SOLUTIONS TO TACKLE YOUTH SUBSTANCE ABUSE IN ASSAM

Executive Summary

The **Assam State Report** of the National Mental Health Survey of India identifies adolescent substance use disorder (SUD) as an urgent public health problem.

Our study is learning from two groups of young Assamese people who show **resilience to SUD**: (a) **15-18 year olds** at increased risk of SUD but who have managed to stay clean; (b) **19-24 year olds** who have engaged successfully with drug rehabilitation.

We have developed a **Pathways to Recovery** model of youth substance use in Assam. This is the first model of its kind and an important public health resource.

KEY IMPLICATIONS FOR POLICY ARE:

In **addition**, interventions are best geared towards encouraging a young person to **accept support** to quit.

Effective interventions, including medical treatment, require also **long-term psychosocial support** to have the best chance of sustaining sobriety.

Investment in **women's rehabilitation** is needed and will contribute also to the wellbeing of their current and future children.

Investment in **family and community education** and **peer-to-peer support** is likely an economical and effective strategy for preventing youth SUD and enabling rehabilitation.



PATHWAYS TO RECOVERY: INFORMING SOLUTIONS TO TACKLE YOUTH SUBSTANCE ABUSE IN ASSAM

Background

Madill, A., Duara, R.,
Goswami, S. Graber, R., &
Hugh-Jones, S. (2022).

Policy Brief 1

Project Website

<https://projectresilience.co.uk/projects/the-big-picture/>
UK Research & Innovation
GCRF ESRC/AHRC

"...when they called, I agreed. I said: "OK. I will do awareness program. I want to." After that when I went for awareness this is the photo. This is my, um, that moment from which my self-confidence has grown so much."

**- Male addict-in-recovery,
21 years old**

As a signatory of the United Nation's International Conventions (Article 47), India is obligated to "act to eliminate the use of illicit drugs, to develop measures to prevent drug use and to ensure availability of treatment for people with drug use disorders."¹ A three-pronged strategy targeting supply, demand, and harm reduction has been adopted.

The Assam State Report of the National Mental Health Survey of India identifies adolescent substance use disorder as an urgent public health problem.² Recommendations of the State Report include working closely with rehabilitation services, decreasing stigma, and encouraging help-seeking through better public awareness.

Many models of addiction exist.³ However, there is little research on the journey from drug initiation through to recovery that is not biologically-based or of known relevance to young people, women, and developing countries. These are serious gaps in understanding that we seek to redress with an emphasis on providing practical implications to inform solutions to tackling youth substance abuse in Assam.



'The Big Picture' Research with Assamese Youth

'The Big Picture' is a research project funded by the UK Research & Innovation Global Challenges Research Fund. We are a partnership between service providers in Assam and universities in the UK. Listening to young people and developing services *for* them *with* them is deemed best practice in global health.⁴ Hence, we seek to understand the experience of young Assamese people around risk, recovery and resilience in relation to substance use disorder (SUD) and mental health. Our goal is to increase knowledge, enhance the voice of young people, and inform practice through impacting policy and promoting public awareness.⁵



Our Study

We are learning from two groups of young Assamese people who show **resilience to SUD**. The first group are **15-18 year olds** at increased risk of substance abuse but who have managed to stay clean. The second group are **19-24 year olds** who have engaged successfully with drug rehabilitation. An innovative aspect of our work is that the **30 young people** in our project were invited to bring **photos** to the meeting in which we listen to their stories of risk, resilience and recovery around drugs.⁶ Each also used their creativity to make a poster to communicate the challenges they have faced and are overcoming everyday (<https://projectresilience.co.uk/outcomes/?project=47-1>). Some also took part in **film-making** to tell their stories of resilience and recovery in inspiring ways and have won awards at international film festivals (<https://projectresilience.co.uk/projects/the-big-picture/>).

As she walks to work, a young Assamese woman recalls how her path to recovery from addiction seemed different from those of men, given the social and cultural expectations surrounding her.

- Female addict-in-recovery, 24 years old



"I got the doctor's information. I came home and discussed about it as it was about the matter of money and I did not want to spend it directly. So, my mother came with me. I did detox. I came out after one week and then I used (substance) again."

- Male addict-in-recovery, 22 years old

Outcomes

Analysis of the research interviews allowed us to develop a **Pathways to Recovery** model of youth substance use in Assam (<https://projectresilience.co.uk/outcomes/?project=47-3>). The model has three phases: *Recreational Use*, *Addiction (Relaxed, Chaotic, & Strategic)*, and *Supported Recovery*. Each phase consists of a cycle between, or transition through, a series of stages. The model enhances our understanding the route into, and out of, drug use and informs prevention and de-addiction interventions and their timing. This is the first model of its kind and an important public health resource.⁷

| Phases | Phase 1 | Phase 2 Addiction | | | Phase 3 |
|--------|-----------------------|-------------------------------|-------------------------------|---------------------------------------|--------------------------------|
| | Recreational Use | Phase 2a Relaxed Addiction | Phase 2b Chaotic Addiction | Phase 2c Strategic Addiction | Supported Recovery |
| Stages | Stage 1 Not using | Stage 3a In addiction | Stage 3a In addiction | Stage 3a In addiction | Stage 3a In addiction |
| | Stage 2 Casual use | | Stage 3b Abstinence | Stage 3c Strategic self-management | Stage 4 Supported treatment |
| | | | | | Stage 5 In recovery |

“My life was unmanageable. Now because of them I am on track. They are showing me direction. Platform is given to me. Family is showing me a way. The whole addict community looks after me.”

- Male addict-in-recovery, 22 years old



<https://projectresilience.co.uk>



“He explained me, he explained me a lot. Then finally I thought, right? And in this place, my realization factor had come (refers to photo) [...] This is what I thought. I, that day I broke. No, I am not powerless. I won't be powerless with you. I go and buy you. Do you come to buy me? I go to the shop to buy you.”

- Female addict-in-recovery, 23 years old



Implications for Policy

Preventing substance use disorder in young people must be a public health priority to avoid a potentially lifelong trajectory of devastation for the individual, their family, and the community. Our work indicates that: (i) peers, family, and the community are well-placed to reduce youth substance abuse disorder, and that (ii) strategies include positive role models and education. Key implications for policy are as follows.

In **'Addiction'**, interventions are best geared towards encouraging a young person to **accept support** to quit. Importantly, **'Chaotic Addiction'**, in which a young person cycles between substance use and abstinence, can be particularly destructive and lead to hopelessness because the young person does not have the support they need to quit drugs successfully.

'Strategic Addiction' occurs when a young person colludes with treatment to sustain their addiction. This is particularly the case with medicalised-only interventions. **Medical interventions require also long-term psychosocial support** to have the best chance of sustaining sobriety.

Women suffering addiction face particular stigma and health risks, yet few rehabilitation services cater for their needs. **Investment in women's services** will contribute also to the wellbeing of their current and future children.

Family and community education and support is vital to disseminate understanding about how to prevent addiction in young people, to identify addiction when it has taken hold, to steer young people into effective treatment, and to support them to stay clean.

Investment in peer-to-peer education and support and presenting **positive peer role models** are likely a cost-effective and productive means of preventing substance use disorder in young people. It is also essential to sustaining sobriety when young people are in recovery from addiction.⁸

References

1. Avasthi, A., & Ghosh, A. (2019). Drug misuse in India: Where do we stand and where to go from here? *Indian Journal of Medical Research*, 149, 689-692.
2. Pathak, K., Deuri, S. P., Gogoi, V., Sobhana, H., Gautham, M. S., Sengupta, S., Banerjee, I., Sarma, S. & NMHS collaborators group (2017). *Assam State Report, National Mental Health Survey, 2015-16*. LGBRIMH.
3. Simon, R., & West, R. (2015). Models of addiction and types of interventions: An integrative look. *The International Journal of Alcohol & Drug Research*, 4, 13-20.
4. Gatera, G., & Pavarini, G. (2020). The voices of children in the global health debate. *The Lancet*, 390(10224), 541-542.
5. Madill, A. Cooke, P., Duara, R., Graber, R., Hugh-Jones, S., & Mirzoev, T. (2019). The Big Picture: Preventing youth substance abuse in Assam. *Dialogues: Wellbeing, Lifespan Perspectives and Practices for Sustainable Communities*. International Conference Booklet, Assam.
6. Duara, R. Hugh-Jones, S., Madill, A. (2021). 'Forced adulthood': An aspect of 'quarterlife crisis' suffered by young English and Assamese adults, *Qualitative Studies*, 6, 11-37.
7. Madill, A., Duara, R., Goswami, S., Graber, R., & Hugh-Jones, S. (in submission). Pathways to recovery model of youth substance abuse in Assam.
8. Graber, R. Turner, R., & Madill, A. (2015). Best friends and better coping: Facilitating psychological resilience through boys' and girls' closest friendships. *British Journal of Psychology*, 107, 338-358.