

Motivations of relapse to drug use by women: phenomenological study

Motivações da recaída ao uso de drogas por mulheres: estudo fenomenológico

Motivaciones de la recaída en el consumo de drogas por parte de las mujeres: estudio fenomenológico

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Abstract: Aim: to understand the reasons attributed to drug use relapse by women assisted at a Psychosocial Care Center for alcohol and drugs. **Method:** phenomenological study, in light of Alfred Schütz's Social Phenomenology. Twenty women undergoing treatment at the service participated in the interviews, between February and May 2017, in the state of Rio Grande do Sul, Brazil. **Results:** relapse to drug use was motivated by relationship influences, due to the loss of family members due to death and due to the experiences and difficulties in social relationships that women established in their lives. **Conclusion:** it is important to know the history of life and the reasons for relapse so that professionals plan care according to the uniqueness of women.

Descriptors: Nursing; Mental health; Substance-related disorders; Recurrence, Women

Resumo: Objetivo: compreender os motivos atribuídos à recaída ao uso de drogas por mulheres assistidas em um Centro de Atenção Psicossocial álcool e drogas. **Método:** estudo fenomenológico, à luz da Fenomenologia Social de Alfred Schütz. Participaram das entrevistas 20 mulheres em tratamento no serviço, entre fevereiro e maio de 2017, no Estado do Rio Grande do Sul, Brasil. **Resultados:** a recaída ao uso de drogas mostrou-se motivada por influências dos relacionamentos, devido as perdas de familiares por morte e devido as experiências e dificuldades nas relações sociais que as mulheres estabeleceram em suas vidas. **Conclusão:** é importante conhecer a história de vida e os motivos da recaída para que os profissionais planejem uma assistência de acordo com as singularidades das mulheres.

Descritores: Enfermagem; Saúde mental; Transtornos relacionados ao uso de substâncias; Recidiva; Mulheres

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Resumen: **Objetivo:** Comprender las razones atribuidas a la recaída del uso de drogas por parte de mujeres asistidas en un Centro de Atención Psicosocial de alcohol y drogas. **Método:** estudio fenomenológico, a la luz de la Fenomenología Social de Alfred Schütz. Veinte mujeres sometidas a tratamiento en el servicio participaron de las entrevistas, entre febrero y mayo de 2017, en el estado de Rio Grande do Sul, Brasil. Resultados: la recaída en el consumo de drogas fue motivada por las influencias de las relaciones, debido a la pérdida de miembros de la familia debido a la muerte y debido a las experiencias y dificultades en las relaciones sociales que las mujeres establecieron en sus vidas. Conclusión: es importante conocer la historia de la vida y las razones de la recaída para que los profesionales planifiquen la atención de acuerdo con la singularidad de las mujeres.

Descriptor: Enfermería; Salud mental; Trastornos relacionados con sustancias; Trastornos relacionados con sustancias; Recurrencia; Mujeres

Introduction

There is a worldwide concern about the number of people using and abusing drugs. Recent data showed that around 5% of the global population used drugs at least once in 2015, and about 29.5 million users suffered from the disorders resulting from drug use. Also, there is an increase in drug use by women and a high risk for chemical dependence.¹

Although women have a lower frequency than men, their use of drugs is seen as a phenomenon that has generated social challenges and demands for public health policies. For a long period, drug abuse was predominantly related to males, showing invisibility of women in the drug use scenario.²

Women who use drugs are seen by society as people who offer danger and who behave inappropriately, against the role assigned to the female, to procreate, to take care of the family and home.³⁻⁴ Thus, women have its image associated with loss of moral value and personality deviations, hindering to seek treatment and recover from them.²⁻³

The profile of women undergoing treatment for drug dependence shows a predominance of the age group of 30 to 49 years old, single, with one child, low education level and do not perform paid work. They also use multiple drugs and have a long-time bond with health services.⁵

Addiction involves physical and psychological elements ranging from impaired control over drug use to tolerance and abstinence symptoms.⁶ Psychosocial Care Centers alcohol and drugs (CAPS AD) emerged To address the health needs of people with addiction. This service proves to be an important care strategy because, in addition to allowing the reception and care for health and social demands, they are also spaces for exchange of experience.⁷ Although these services provide comprehensive care, it is often the people with relapses.

Relapse means to return to drug use after a period of abstinence, commonly together with the resumption of symptoms of addiction.⁸ People with cycles of periods of abstinence, relapse and restart incessant consumption are part of their addiction.⁹

Studies on relapse mostly highlight the protective and risk factors for this relapse.⁹⁻¹¹ They also address the intrapersonal and interpersonal determinants of relapse and are usually developed with men.¹² Thus, there is a scientific production scarcity related to the subjective dimension of women and gender differences about relapse.

Therefore, this study contributes to the subjective understanding of the reasons that lead women to experience relapse to drug use. Through this understanding, it is possible to reflect on the care practices directed at the singularities of the female population.

The research question of the study was: what are the reasons attributed to drug use relapse from the perspective of women users of Psychosocial Care Center Alcohol and Drugs? It aimed to understand the reasons attributed to drug use relapse by women assisted in a Psychosocial Care Center for Alcohol and Drugs.

Method

This research is a qualitative approach study based on Alfred Schütz's social phenomenology, as it enables the understanding of the meaning of actions, interactions, and experiences that human beings experience in the world of life, as being intersubjective, and the perception about their experiences.¹³ Thus, phenomenology allows the understanding of the

relapse in the perception of women who have experienced this phenomenon in their daily lives. It also enables to apprehend the influences of social relationships in the lives of women regarding their actions and motivations.

People act in the world according to their motivations, which may be through the "why" and "for" reasons. The "why" reasons refer to the past and the objective. The "for" reasons are related to what the person intended to achieve with a given action, including the subjective. This research addressed the "why" reasons for relapse, which refer to actions that have already been completed.¹³

The research was developed in a CAPS AD, located in a municipality in the interior of Rio Grande do Sul, Brazil. The inclusion criteria were women from 12 years old with a history of drug relapse and undergoing treatment at CAPS AD. We opted for the inclusion of participants from 12 years old because this service assists people above this age group. However, there was no need for parental permission to participate in the research, as the participants were adults or older adults. The exclusion criteria were women under the influence of some drug and having difficulty talking to the researcher at the time of the interview. All 20 women who were invited agreed to participate in the survey and no participants were excluded.

The information was collected through a phenomenological interview, conducted individually, from February to May 2017. The interviews took place on the days when the women had scheduled appointments, CAPS AD cohabitation groups, at home, or they came exclusively to the community for the interview at a time previously scheduled with the researcher. All interviews took place according to the participants' availability and lasted between forty and seventy-five minutes.

The phenomenological interview is an encounter with people who has experienced or is experiencing the phenomenon and that only through speech, they can express their awareness

about this phenomenon.¹⁴ Thus, for the phenomenological interview, the following guiding question was used: What are the reasons that led you to relapse to drug use?

The number of participants has not been predetermined since phenomenological studies seek sufficiency of meaning rather than quantity. This stage was ended when the sufficiency of meanings expressed in the speeches was reached.¹⁵ Thus, the interviews were closed with the 20th interviewee. The interviews were conducted individually, with the authorization of each participant. The speeches were recorded on a digital recorder and later transcribed.

For data analysis, the interviews of the women were read and reread, understanding the reasons for relapse to drug use. Subsequently, the concrete categories of the experiences were organized, which represent the act of women, through significant passages identified in the speeches. From this, we tried to describe the typical action of relapse to drug use by them, that is, what is common to this social group.¹³

We used Alfred Schütz's theoretical conceptions of social phenomenology to interpret the results. We respected the ethical principles that establish the norms for conducting research involving human beings, explained in Resolution 466/12 of the National Health Council. The letter "W" was used to preserve the anonymity of women, followed by a number corresponding to the order in which the interview was conducted. Thus, W1 means the first woman interviewed and so on until W20.

The Research Ethics Committee of the Federal University of Santa Maria approved this research under Opinion 1,867,646, CAEE 61019616.8.0000.5346, issued December 15, 2016.

Results

Twenty women drug users, aged between 20 and 60 years old, participated in the study. All participants had experienced multiple relapses. The period between abstinence and last relapse ranged from 4 months to 6 years.

Regarding their education level, 12 women had an elementary school, seven had completed high school, and one was illiterate. Regarding their marital status, five participants were divorced, six were married, eight were single, and one was a widow. Only one of the women had no children. About their job/occupation, five women were working, two were retired, two were doing household chores, and 11 were not working.

From the analysis of the experiences of women with a relapse, and the perspective of social phenomenology, it was possible to understand the reasons for relapse to drug use. Thus, three categories emerged: acting by influences of the relationships, experiencing difficulties in their relationships, and experiencing the loss of family members by death.

Acting by influences of the relationship

When women look at their past reveal that their relapse into drug use was motivated by the influence of their social relationships, friendships, and partners:

My ex-husband was the one who helped me drink the most. He didn't drink, but he encouraged me a lot. [...] He bought it. He said he preferred to see me like this, that I was always quiet and closed. Then when I drank, I laughed, played, did things, became more liberal, and liked it. (W4)

I have a lot of drinking friends, and I'm not living with them. These, for sure, I will drink. Obviously I'll be with them, I'll drink. When I look at people drinking I feel like drinking, and I have already relapsed like this [...]. (W11)

Over time, I started using it because my husband used it indoors. Then I said to him, "But if you don't stop using it inside my house, I'll end up using it with you." [...] Then when he uses it, I use it together, but I don't know how to control myself, and I use it a lot. (W12)

Relapse motivation occurred due to the influence of people with whom women have a relationship, as they share the same space with other users, or when they suggest that their relationship is better due to the effect of the drug and encourage them to use it. Thus, the motivation of relapse to drug use by women is related to the maintenance of social relationships.

Experiencing difficulties in their relationships

Women expressed that the relapse to drug use was caused by the difficulty of relationship with their peers (mothers, children), the separation with the partner (divorce) and loneliness, due to the distance from other family members.

My son left home at 16 years old. [...] And then, like that, I had about three relapses, because I missed him so much because I raised him alone, he was my treat. And today, he doesn't care about me. [...] I left the service, took the same bus as him, and he ignored me. And after he left home like that I had several relapses. (W4)

I went inside the drugs when I left home [when divorced]. I couldn't take it anymore and left the house. I left everything! I took him [son] and went to my mother's house, and then I started using it. Then I no longer had those reasons why I won't do it. (W5)

She [mother] didn't give me affection. [...] And she tells me that if she weren't happy, I wouldn't be either. After that I fell, and nobody gave me attention [...]. I think it's more like this that is the mother's lack of affection. It's no enough having all the best and the best, and you do not have affection. (W6)

[...] When I am alone, I feel like it and the time I relapsed was like this. [...]. It gave me a very strong urge to drink. I couldn't control it, so I drank. (W10)

Relapse to drug use occurs when women recall their life history, some situations imposed in their daily lives, such as the difficulty of relationship with their mother, abandonment by

their partners, distancing from other family members, and feelings of loneliness. Thus, they relapsed when their prospects are not met by their peers.

Experiencing the loss of family members by death

When understanding the reasons attributed by women to relapse to drug use in their world of life, it is understood that their lives were marked by several losses observed in the following statements:

After his death [husband] I used it again, I was using it. [...] The relapses, I think it was because of the death of my husband. (W2)

It was the death of my son. It was because of that, but I endured a long time without using it. Then, then, I relapsed. (M7)

When my father died, the world fell for me [...]. (W13)

The loss of my mother and my brother. [...] After my mother passed away, I relapsed. (W20)

The relapse phenomenon was intrinsically associated with the feelings experienced by women and the memories of their past, in which they expressed that they relapsed when they remember the losses of the people with whom they lived. Thus, the typical action of women revealed that relapse is motivated by the influence of people with whom women relate, difficult experiences in their relationships, and the loss of family members by death.

Discussion

The findings of this study showed that relapse motivation is related to the influences of people with whom women have a relationship. In this sense, the world of everyday life is the scenario where people live, as well as the object of their actions and interactions, so they act in the world from what is presented to them as a social reality. This world is intersubjective and

cultural because people live together, and intersubjective because they unite through distinct social relationships.¹³

Women's relapse occurs by the feeling of belonging to the social group as a way of maintaining social relationships. The situations in which users submit to the influence of third parties to adopt habits of drug use behavior are interpersonal determinants related to the influence of society concerning use. The social effect of drug use is a factor that favors relapse.¹²

Thus, ceasing its use is difficult to achieve because users sometimes live with other people who use drugs, and they have a negative influence, encouraging drug use.¹⁶ Also, living with people who stimulate others through may be considered as unfavorable situations that represent a difficulty in maintaining abstinence.¹⁰

It is common for women to start drug use by the influences of their family during childhood, partners, or friends.^{5,17} Thus, drug use is a socially constructed custom and favors social interaction because the customs system sets a standard in which the internal group "defines their situation."¹³ In this case, while women are living with people who use drugs and they stop taking drugs, they move away from them and can result in the breakup of their relationships.

The importance of a careful view of these women is emphasized because, in an attempt to avoid relapse, they refrain from going out with friends, going to places where drinks and/or drugs are present, and even going to parties. This separation leads them to social isolation, which reflects feelings of loneliness, anxiety, abandonment, and exclusion, and makes treatment even more difficult.

Another reason women relapse is related to the difficult experiences they have had in their relationships throughout their life history. The fragility in affective bonds such as lack of affection, respect, dialogue and the absence of the mother and/or the father can have negative consequences on relationships and interfere in the behavioral development of children.¹⁸

The absence of the family and companions and living with daily conflicts in the social environment and family cause insecurity and difficulty in being alone, contribute to the return

to drug use.¹⁰ Some feelings such as frustration, anxiety, loneliness, and fear are associated with relapse, especially when there is difficulty in coping it.^{10,12}

The family influences women's life history, especially those families with a fragile structure. The lack of affection of the mother may have reflected in the decisions and acts of these women. And later, the lack of a good relationship with their children and their husbands led them away, breaking or weakening these affective bonds, leading them to relapse.

This shows how relationships leave marks, which influence women in choices, decisions, and actions.¹³ Thus, women's experiences in the world of life were present as motivations for relapse, along with their biographical situation.

Women guide and act according to the knowledge they have through their experiences to deal with the challenges imposed by life, that is, according to their biographical situation. Their history is established by prior subjective experiences, which have a common sense, but each woman is specifically situated in the world of life.¹³

Women abuse drugs for different reasons, for example for the difficulties experienced in their relationships, such as the aggressions they suffer in adulthood, to forget the violence and abuse suffered in childhood, and to ease the pain of family losses.¹⁷ Drug use is related to the experience of traumatic moments, such as the loss of a family member and even the termination of a romantic relationship.^{17,19} This is in line with another study that shows that drug use occurs to relieve some difficult situations for users to experience or even to cope with the disappointment of life caused by their parents' death.⁹

The marks of loss remain in the memory of those who suffer them. These marks cause suffering, distress, and difficulty in dealing with these feelings. The biographical situation is unique and belongs to the memories of this world, the reach of the past of those who lived it, among other things.¹³ In this sense, the relapse of drug use by women was motivated by the loss

of family members due to death living in their world of life. Recalling these losses, they have the desire to use the drug again.

When women act, they turn their actions toward someone so that they live and share relationships with others, establishing different types of relationships with family and partners. This means that living in a world of life means being in interactive engagement with many people in complex social networks.¹³

The relapse of drug use by women was motivated by their social influences and their life histories. Thus, relapse is a broad and complex phenomenon that needs to be understood and addressed by professionals according to the singularities arising from each woman's life history and the understanding of the dynamics of social relationships they establish in their world of life.

Final considerations

This study sought to understand the reasons for the drug use relapse by women assisted in a CAPS AD, which showed that relapse occurs due to the influences of relationships, experiences of difficulties in their relationships, and experiences of loss of family members by death.

Women experienced realities suffered, permeated by violence, weakening of affective bonds, loss of family members, influence, and encouragement to drug use by friends and even family members at home, among others that are inherent in their lives. Thus, knowing the life history of women allows us to understand the meaning of relapse to drug use, which should be part of the planning of actions of professionals working in social and health services that assist this population.

The reasons for relapse have been unveiled; however, we suggest further studies to be developed that identify women's motivations for women to remain abstinent and what

strategies they use to prevent relapse. Also, we need to broaden the discussions on gender differences in relapse, since most studies do not discuss these singularities.

The study had limitations because it occurred in a single service and region of the country; however, it shows that the professionals should develop possible strategies for relapse prevention, to integrate issues such as loss and grief, so that they reflect and strengthen their ability to cope without having to restart using drugs.

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Interpretation of data; and writing and critical review.

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