



Medical Implications of Addictive Behavior in Adolescents

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Abstract

Drug addiction is increasing, but whether or not it is a disease or a choice remains debatable. For proponents of addiction as a disease, drug addiction is long-lasting and can be likened to a chronic disease that is unlikely to be cured. Addiction is also a relapsing and progressive condition, which justifies the assertion that it is a disease. However, those in favor of the assertion that drug addiction is a choice contend that the behavior arises from issues such as peer pressure or bad company, risky sexual behavior, and financial problems or poverty. However, this stance is worth criticizing because homelessness could result from a natural disaster; which also holds for the case of poverty that arises from socio-economic and cultural disadvantages associated with historical injustices (that cause stress, hence drug addiction). Given that the latter examples suggest social stress accruing from external causes, the extent to which the assertion that drug addiction is a choice (and not a disease) remains debatable. Similarly, the assertion that drug addiction is a disease is debatable because some individuals could resort to the use of (and become addicted to) drugs due to a cause such as peer pressure, which makes it questionable on whether or not the behavior qualifies to be a disease. Overall, whether drug addiction is a disease or a choice should be explained from the perspective of the causes.

Keywords: Medical Implications, Addictive Behavior, Adolescents etc.

1 Introduction

Drug addiction forms one of the most common issues facing the current world. A subject is yet to receive in-depth analysis is whether drug addiction is a choice or a disease. Similar to heart disease, cancer, and diabetes, the Gale Group (2014) observed that addiction arises from combinations of biological, environmental, and behavioral factors. For about 50 percent of the likelihood of drug addiction, most of the current literature contends that genetic risk factors form the leading causative agent (Glanz and Pickens 1992). Imperative to highlight is that addiction alters the functioning of the body and brain. According to Healey (2013), the alterations may pre-exist or arise from risky substance abuse. If untreated, addiction has been observed to lead to consequences such as mental and physical health disorders; which call for medical attention. If untreated for a significant period, drug addiction has also been documented to account for

more life-threatening, disabling and severe consequences (Gale Group 2014). Whereas some studies document that drug addiction exhibits features associated with disease and that it is a disease, others contend that addiction is a choice. This paper debates the two sides of the subject and seeks to shed light on whether drug addiction should be treated as a disease or a choice.

2 Methodology

For some studies, drug addiction reflects a chronic disease. According to Healey (2013), a chronic disease is long-lasting. Glanz and Pickens (1992) observed that chronic disease could not be cured, but it can be controlled. As observed by the Gale Group (2014), drug addiction satisfies these conditions and, thus, qualifies to be a disease (because it is long-lasting and also hard to cure, but can be controlled). Healey (2013) observed further that about 25 percent to 50 percent of individuals

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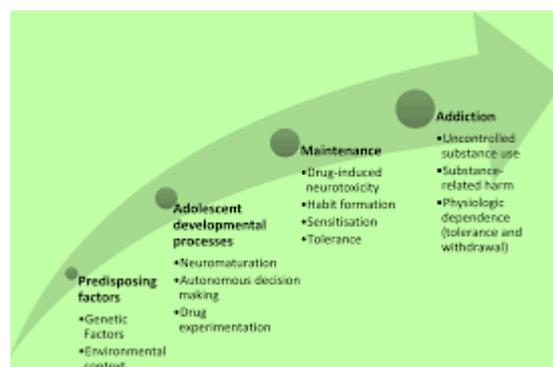
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experiencing substance use tend to have chronic and severe disorders. For these individuals, Glanz and Pickens (1992) documented that addiction comes in the form of relapsing and progressive disease. This “disease,” as avowed by Gale Group (2014), requires intensive treatment, as well as continuing aftercare. For proponents of the position that drug addiction is a disease, the majority hold that individuals who experience addiction should not be blamed because they cannot choose the manner in which their bodies and brains respond to alcohol and drugs (Healey 2013). These proponents assert further that drug addiction is a disease and that some can control the use of drugs while others cannot. However, other scholarly observations hold that drug addiction is not a disease. For these studies, drug addiction is a choice (Glanz and Pickens 1992). Notably, the early stage tends to be a choice, but as the brain is changed through addiction, the majority of the experts indicate that individuals lose behavioral control (Gale Group 2014). What poses dilemma is that choice fails to give insight into whether or not something is a disease. According to Healey (2013), conditions such as some forms of cancer, diabetes and heart disease are associated with personal choices that include sun exposure, exercise, and diet. Due to these choices, diseases occur in one’s body. Imperative to acknowledge is that some scholarly insights avow that addiction cannot be likened to disease because some individuals are likely to get better without treatment; including those with mild substance use disorder (that call for little or no treatment) (Glanz and Pickens 1992).

3 Results and Discussion

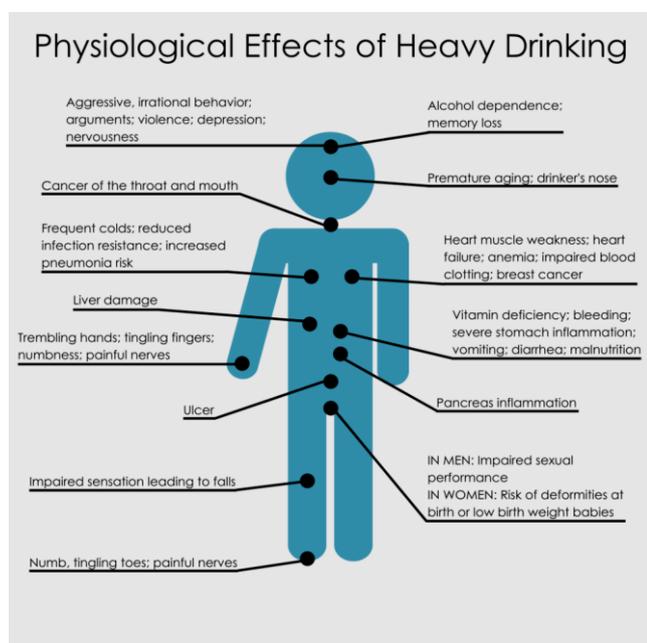
Indeed, most of the causes of drug addiction are also evidence of the affirmation that it is caused by choice, rather than emerge as disease. According to the Gale Group (2014), one of the notable causes of drug addiction entails high-stress levels associated with a problem such as psychological trauma. For scholarly studies in support of this stance, drug addiction tends to be a choice in situations where the high levels of stress arise from issues such as bad company and relationship problems. Hence, the stance suggests that an individual may choose the bad company or decide to be in a relationship with a spouse who is responsible for the trauma that results from an issue such as domestic violence, which makes

them use and be addicted to drugs as a coping mechanism. However, this observation exhibits a two-fold outcome. On the one hand, the documentation can be supported in such a way that it gives insight into the role of one’s choice of company and a spouse as an action that leads to addiction indirectly. On the other hand, this assumption could be criticized for failing to acknowledge that the cause of addiction, in this case, does not arise from the addict’s side. Rather, it is the company and spouse with which one associated, often responsible for the perceived trauma, that leads to the addiction. Despite the mixed outcomes, explaining drug addiction from this perspective suggests that it comes out of choice because the spouse or bad company that one decides to associate with (initially) forms the central cause of the addiction, having accounted for problems such as domestic violence and peer influence.



Mental illness has also been examined in relation to the debate of whether drug addiction comes out of choice or emerges as a disease. According to Glanz and Pickens (1992), a significant number of individuals experiencing mental illness are likely to resort to drugs due to hopelessness; with this path emerging as a coping mechanism that seeks to shield one from the world’s realities. Healey (2013) observed that the situation tends to be exacerbated by socio-economic disadvantages such as historical injustices and poverty. Notably, historical injustices such as racial discrimination tend to isolate individuals such as those from ethnic minority communities from mainstream society, a situation that attracts drug use and addiction as an alternative coping mechanism. In relation to these socio-economic problems, whether the causes of addiction (such as poverty and historical injustices), which are associated with drug addiction, are out of choice or not poses a dilemma. Imperatively, poverty could be or could not be out of choice.

Glanz and Pickens (1992) documented that a form of poverty arising from a problem such as a natural disaster is unlikely to arise out of choice; as the disaster could cause loss of property and the displacement of families; with some left homeless. Should these individuals resort to drugs relative to their perceived trauma, it becomes evident that the poverty may not have arisen out of choice and that the assumption that their use of (and addiction to) drugs emerges out of choice becomes questionable. However, a form of poverty arising from a community's reluctance to exploit the available resources is likely to justify that drug use as a consequence of poverty is a choice.



The role of biological factors and the environment has also been examined relative to the question of whether drug addiction is a choice or a disease. As documented by the Gale Group (2014), biology holds that certain genes are likely to combine with environmental factors and cause drug addiction. Specifically, Healey (2013) avowed that this combination accounts for almost 50 percent of population vulnerability to addiction. This evidence has been confirmed in studies that document that when one has a mental illness, is African American, or is male, they are likely to be addicted to drugs or exhibit a higher risk of progressing to addiction. However, this assertion could be criticized in such a way that it fails to clarify whether the being African America (or male or having a mental illness) comes out of one's choice, hence addiction.

4 Conclusion

In summary, drug addiction is increasing but whether or not it is a disease or a choice remains debatable. For proponents of addiction as a disease, drug addiction is long-lasting and can be likened to a chronic disease that is unlikely to be cured. Addiction is also a relapsing and progressive condition, which justifies the assertion that it is a disease. However, those in favor of the assertion that drug addiction is a choice contend that the behavior arises from issues such as peer pressure or bad company, risky sexual behavior, and financial problems or poverty. However, this stance is worth criticizing because homelessness could result from a natural disaster; which also holds for the case of poverty that arises from socio-economic and cultural disadvantages associated with historical injustices (that cause stress, hence drug addiction). Given that the latter examples suggest social stress accruing from external causes, the extent to which the assertion that drug addiction is a choice (and not a disease) remains debatable. Similarly, the assertion that drug addiction is a disease is debatable because some individuals could resort to the use of (and become addicted to) drugs due to a cause such as peer pressure, which makes it questionable on whether or not the behavior qualifies to be a disease. Overall, whether drug addiction is a disease or a choice should be explained from the perspective of the causes. If the cause is natural — such as the case of the role of genes or biology, it can be inferred that drug addiction is a disease. However, if the cause emerges out of one's failure to control their values, feelings, and attitudes, it is worth contending that in such a scenario, drug addiction is a choice. Overall, it is worth inferring that drug addiction can be a disease or a choice and that the cause of addiction plays a moderating role and should be used for purposes of distinction.

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