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## MOTIVATIONAL FACTORS IN THE FORMATION OF YOUTH DRUG ADDICTION

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The paper aimed to study the motivational factors in the formation of youth drug addiction and develop practical recommendations to counteract the spread of drug addiction among young people. To achieve this aim, in 2021–2023, we conducted the questionnaire survey and psychodiagnostic examination among two groups of respondents who sought help at the City Addiction Clinical Hospital “Sociotherapy” in Kyiv. The first group consisted of adolescent drug addicts aged 18–23 years (n=52). The second group consisted of young people aged 24–29 years (n=46) who agreed to participate in the research. Research methods: bibliosemantic, questionnaire survey, comparative, psychological and diagnostic, method of system analysis and generalization, mathematical and statistical. The priority motivational orientations of drug addiction among modern youth have been identified. It has been found that drug-addicted adolescents (18–23 years old) and older young people (24–29 years old) have almost similar indicators of motivation, which designates similar determinants of drug addiction in young people. The motivational orientations of drug addiction among modern youth are primarily pseudo-cultural motives; search for a source of positive emotions and new sensations; hedonistic motives; drug use as a result of getting rid of boredom, apathy, and “emptiness”. Practical recommendations have been developed to counteract the spread of drug addiction among young people.

**Key words:** health, motivation, drug addiction, addictive behavior, youth.

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## МОТИВАЦІЙНІ ЧИННИКИ ФОРМУВАННЯ НАРКОТИЧНОЇ ЗАЛЕЖНОСТІ МОЛОДІ

Метою було дослідити мотиваційні чинники формування наркотичної залежності у молоді та розробити практичні рекомендації для протидії поширенню наркоманії серед молоді. Для досягнення мети упродовж 2021–2023 років ми провели анкетування та психодіагностичне обстеження серед двох груп респондентів, які зверталися за допомогою до міської наркологічної клінічної лікарні «Соціотерапія» міста Києва. Першу групу становили наркозалежні юнацького віку 18–23 років (n=52). Другу групу становили пацієнти молодіжного віку 24–29 років (n=46), які дали згоду на участь у дослідженні. Методи дослідження: бібліосемантичний, анкетний, порівняльний, психолого-діагностичний, метод системного аналізу та узагальнення, математично-статистичний. Встановлено пріоритетні мотиваційні орієнтації наркотизації сучасної молоді. Виявлено, що наркозалежним юнакам (18–23 років) та більш старшим молодим особам (24–29 років) притаманні практично подібні показники мотивації, що свідчить про аналогічні детермінанти формування наркотичної залежності у молоді. Мотиваційними орієнтаціями наркотизації сучасної молоді є насамперед псевдокультурні мотиви; пошук джерела позитивних емоцій та нових відчуттів; гедоністичні мотиви; використання наркотиків як результату позбавлення нудьги, апатії, «порожнечі». Розроблено практичні рекомендації для протидії поширенню наркоманії серед молоді.

**Ключові слова:** здоров'я, мотивація, наркотична залежність, адиктивна поведінка, молодь.

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In the late twentieth and early twenty-first centuries, drug abuse in the world surpassed all critical limits. Today, all countries of the world, including Ukraine, are experiencing a steady “rejuvenation” of drug addiction. In the last decade, the use of alcohol, drugs, and other psychoactive substances by minors and young people has become a problem that poses a serious threat to public health, the country’s economy, the social sphere as well as law and order.

Drugs can be purchased in schools, at discos, in nightclubs and cafes, in well-known places on the streets, in parks, and in the apartments of drug distributors and dealers. Drug traffickers have long identified educational institutions as markets for selling drugs to adolescents and young people.

We believe that the work of law enforcement agencies to combat drug trafficking is not enough, because only forceful methods cannot solve the problem. Socio-psychological processes also play a

significant role. In particular, contrary to the widespread view of idleness as the main cause of drug use, adolescents themselves rarely name boredom as such a cause.

Dependent behavior, as a form of destruction, is manifested in an irresistible attraction to an object that is a tool for satisfying a person's need for psychoactive substances [3, 4, 8]. One of the forms of addictive behavior is chemical dependence. The difficulty in working with chemically dependent individuals is that not everyone who suffers from the syndrome is fully aware of their problem. Many of them still believe that they can control their use and will be able to stop using drugs if necessary [1, 2, 6]. Quite often, there are no state rehabilitation centers for young people in the region, and most clients are unable to pay for commercial drug treatment services.

**The purpose** of the study was to study the motivational factors in the formation of youth drug addiction and develop practical recommendations to counteract the spread of drug addiction among young people.

**Materials and methods.** To achieve this aim, in 2022–2023, we conducted the questionnaire survey and psychodiagnostic examination among two groups of respondents who sought help at the City Addiction Clinical Hospital “Sociotherapy” in Kyiv. The first group consisted of adolescent drug addicts aged 18–23 years (n=52). The second group consisted of young people aged 24–29 years (n=46) who agreed to participate in the research. The selection of respondents was carried out in consultation with the subjects themselves. The duration of drug use and the preferred type of drug were not taken into account.

Research methods: bibliosemantic, questionnaire survey, comparative, psychological and diagnostic, method of system analysis and generalization, mathematical and statistical. The initial survey was conducted using the questionnaire developed by the author's team, which contains 4 questions (age; place of residence; income; range of interests). The next step was to interview respondents to determine the motivating factors of possible addictive behavior (the author's questionnaire contains 10 questions). Before the survey, both groups were provided with general information about signs of addictive behavior, possible indicators of individual changes in personality under the influence of drugs, prospects for drug use, etc. The amount of time spent on the questionnaires was the same for all categories of respondents. The survey was anonymous. The comparative analysis was carried out between the groups of respondents, the main criterion was age (adolescence and youth), which essentially reflected the sphere of their interests and life-sustaining activities. The statistical processing of the data was carried out on a personal computer using the MS Excel application program.

The research was carried out according to the requirements of the Code of Ethics of National Academy of Internal Affairs (protocol No. 01 of 10 January 2019). Informed consent was received from all individuals who took part in this research and who could refuse participation at any time.

**Results of the study and their discussion.** The age indices of the respondents were distinguished from the very beginning (adolescents and youth), which made it possible to distinguish the category of young people, so they were not analyzed. Other data made it possible to characterize the respondents based on general questions.

It was found that among the adolescents, 69.2 % of respondents live in large cities, 23.1 % in small towns, and 7.7 % in suburbs or rural areas. As we can see, the overwhelming majority of adolescent respondents are from urban areas, which indicates a greater likelihood of access to possible drug sales outlets. This is also confirmed by the survey of drug users among young people – 73.9 % are residents of large cities, 21.7 % – small towns; and 4.4 % of respondents live in the suburbs. In our opinion, this gives us the right to talk about the greater awareness of urban residents about the effects of drugs on the human body, which increases the temptation to enjoy their use. It is worth noting that the respondents have different types of occupations (place of work). The majority of the surveyed adolescents (82.7 %) have jobs that are primarily related to educational activities, which does not always provide for the possibility of additional income. Their sphere of communication (circle of interests) is limited exclusively to their immediate social and/or educational environment (76.9 %). At the same time, 17.3 % have other sources of income and thus have a parallel occupation to their studies (food, marketing, beauty and health, delivery services, etc.). As for the representatives of the second group (n=46), only 26.1 % have a stable income, and their circle of interests and communication is determined by their professional and/or social environment. They often work as sellers of goods, food delivery people, etc. They are quite self-sufficient and self-motivated, which gives them a wider choice of means to satisfy their need for drugs. 73.9 % of respondents shift with situational earnings; their circle of interests and communication is limited to leisure groups or acquaintanceships formed by previous experience. They are less controlled by the social environment because the choice of their behavior model is situational and often associated with delinquent manifestations.

The study of the motivational sphere of the respondents' personality to identify the most significant motivations for possible addictive behavior has led to the following results (Table 1).

As we can see, the strong motivational orientations that are likely to contribute to the emergence of addictive behavior in drug addicts of adolescent age (18–23 years) are: 1) search for a source of positive emotions and new sensations (65.4 % – the position of “pronounced manifestations of the motive” significantly prevails); 2) pseudo-cultural motives (influence of the social microenvironment) (55.8 % – “pronounced manifestations” and 34.6 % – “situational manifestations”); 3) motives for deviant behavior as a result of getting rid of boredom, apathy, “emptiness” (51.9 % – “pronounced manifestations” and 25.0 % – “situational manifestations”); 4) hedonistic motives (desire to get physical and psychological pleasure from the effects of the drug) (48.1 % – “pronounced manifestations” and 28.8 % – “situational manifestations”), etc.

Table 1

**Correlation of motivational orientations of addictive behavior associated with possible drug use by respondents, (%)**

The main motivational orientations of behavior	Degree of manifestation	Categories of respondents	
		(18–23 years old) n=52	(24–29 years old) n=46
Search for a source of positive emotions and new sensations	a	65.4	52.2
	b	28.8	34.8
	c	5.8	13.0
Hedonistic motives (desire to get physical and psychological pleasure from the drug)	a	48.1	47.8
	b	28.8	45.7
	c	23.1	6.5
Pseudo-cultural motives (influence of the social microenvironment)	a	55.8	52.2
	b	34.6	32.6
	c	9.6	15.2
Motives for deviant behavior as a result of getting rid of boredom, apathy, “emptiness”	a	51.9	47.8
	b	25.0	36.9
	c	23.1	15.3
Desire to increase the efficacy of one's own behavior or professional activities	a	34.6	39.1
	b	53.8	36.9
	c	11.6	24.0
The desire to subjugate individuals or a reference group	a	21.2	15.2
	b	23.1	28.3
	c	55.7	56.5

Note: a – pronounced manifestations of the motive; b – situational manifestations of the motive; c – not observed at all.

At the same time, the priority motivational orientations that determine the addictive behavior of young people aged 24–29 are as follows: 1) pseudo-cultural motives (influence of the social microenvironment) (52.2 % – “pronounced manifestations of the motive” and 32.6 % – “situational manifestations”); 2) search for a source of positive emotions and new sensations (52.2 % – “pronounced manifestations” and 34.8 % – “situational manifestations”); 3) hedonistic motives (desire to get physical and psychological pleasure from the effects of the drug) (47.8 % – “pronounced manifestations” and 45.7 % – “situational manifestations”); 4) motives for deviant behavior as a result of getting rid of boredom, apathy, “emptiness” (47.8 % – “pronounced manifestations” and 36.9 % – “situational manifestations”), etc.

Comparing the above quantitative indicators of respondents' motivational orientations that contribute to the development of drug addiction, we can identify certain generalized positions. Both groups of respondents (adolescents (n=52) and young people (n=46)) are sufficiently characterized by the following motives for possible addictive behavior: search for a source of positive emotions and new sensations (adolescents aged 18–23 years – 65.4 % “pronounced manifestations of the motive”; young people aged 24–29 years – 52.2 % “pronounced manifestations” and 34.8 % “situational manifestations”), as well as pseudo-cultural motives due to the influence of the social microenvironment (adolescents – 55.8 % “pronounced manifestations of the motive” and 34.6 % “situational manifestations”; young people – 52.2 % “pronounced manifestations of the motive” and 32.6 % “situational manifestations”). This can be explained by the fact that at the age of 18–23, adolescent youth is characterized by the completion of personality formation processes, which determines the influence of the immediate social environment with a certain system of beliefs and values. The individual psychological perception of the family microclimate plays a key role here. Often, adolescents protest against conflict situations in the family not in banal insults,

but in the search for additional attention outside the walls of their own homes, which leads to getting into unfavorable multi-age groups, where they take their first steps in using drugs. At the same time, young people of this age tend to imitate the behavior of authority figures and certain celebrities who demonstrate drug use behavior. It is also worth noting that during this period, adolescents are just beginning to consolidate certain life and educational (professional) experiences, and therefore often seek new emotions and sensations. They try to use drugs to experience the feeling of an idol or an authoritative person – but this leads to addiction and further mental degradation and deterioration of physical health. This confirms the priority of the above motives for possible drug-addictive behavior.

In the system of motivational orientations of drug addicts aged 24–29, hedonistic motives (the desire to get physical and psychological pleasure from the effects of the drug) take the third place (47.8 % – “pronounced manifestations of the motive” and 45.7 % – “situational manifestations”). These motives rank fourth (48.1 % – “pronounced manifestations of the motive” and 28.8 % – “situational manifestations”) for drug-dependent adolescents. This motivation in a way reflects the meaning of drug addiction among young people – a person tries to change his or her physical and mental state artificially. Quite often, uncertainty about one’s life prospects and even low social value lead people to look for a means to eliminate unpleasant thoughts, create a positive atmosphere, and feel happy. That is why it is very important to monitor the psychological reasons why young people try to change their physical and psychological state in correctional and preventive work with modern youth. It has also been found that an important place in the list of motives for drug addiction behavior can be occupied by drug use as a result of getting rid of boredom, apathy, and “emptiness” (adolescents – 51.9 % “pronounced manifestations of the motive” and 25.0 % “situational manifestations”; drug users aged 24-29 years – 47.8 % “pronounced manifestations of the motive” and 36.9 % “situational manifestations”). It should be noted here that a low level of emotional development is often manifested by limited interests, low morality, and a focus on satisfying the desire to have fun. A large amount of free time, which contributes to boredom and “emptiness”, as well as a low culture of organizing one’s leisure time activities, turns into a desire to saturate one’s life with more thrills. This reason for drug use is not only a theoretical problem but also practically confirms the spread of adolescent addiction. Hence, the work of psychologists, educators, and social workers is becoming increasingly important not only for the prevention of deviant behavior among adolescents but also for the organization of orientation activities and leisure time activities.

Thus, based on the questionnaire survey, it was found that both groups of respondents (drug-addicted adolescents (n=52) and older young people (n=46)) have similar indicators (the differences are in the ranking), which indicates similar determinants of youth drug addiction. The priority motivational orientations of their drug addiction are pseudo-cultural motives; search for a source of positive emotions and new sensations; hedonistic motives; and motives of deviant behavior as a result of getting rid of boredom, apathy, and “emptiness”.

Given this, appropriate measures to counteract the spread of drug addiction among young people are relevant. They should include:

- assistance in avoiding the influence of a marginalized group or its representatives, while choosing the company of people who do not prefer drugs as a way of demonstrating social protest;
- use of real communication primarily in the social microenvironment (non-drug users) to stimulate psychological support (mainly family, friends, etc.);
- focusing on the expediency of stimulating positive emotions, avoiding depression, emotional stress, etc.;
- work on the model (way) of one’s life-sustaining activities, i. e. replace idleness and passive lifestyle with new habits and/or hobbies, transform isolation and stiffness into visiting public places, which will make it possible to feel more cheerful and energetic;
- if mercenary needs and hedonistic motives dominate, provide support in forming a clear understanding of the most rational means of satisfying them;
- assistance in the development of relevant personality qualities, the lack of which is usually compensated for by drug use (confidence, resilience, perseverance, determination, communication skills, vitality, etc.), as well as in the formation of one’s lifestyle, study, and work to overcome psychological barriers in social (professional) relationships;
- argumentation of the real threats to the physical and mental well-being of the individual from drug use; instead, identification of optimal techniques of mental self-regulation and recreation activities (outdoor walks, travel, attending concerts, joint meetings, etc.) that allow developing existing mental reserves, optimizing the emotional and volitional sphere, and activating cognitive processes.

Thus, it can be argued that in terms of general indicators, the selected groups of respondents (adolescents (n=52) and young people (n=46)) demonstrate relative similarity in terms of the main problems that are currently inherent in modern youth. However, there are differences in some indicators (occupation and range of interests, ranking of motivational orientations). This determines the expediency of preventive and psycho-correctional work among young people to prevent the development of deviant (addictive) behavior in this category of people.

The state, level, and dynamics of negative social deviations, including drug addiction, serve as a kind of mirror of social reality. Being a complex phenomenon that includes social, medical, psychological, criminological, and other aspects, drug addiction spreads without proper intervention from social institutions (health care, education, law enforcement, social protection institutions, family, etc.).

The essence of addictive behavior is the formation of a young person's desire to escape from reality by artificially changing their mental state through the use of certain substances or constant focus on certain activities to develop and maintain intense emotions [12, 13, 14]. This leads to mental and physical dependence. The conditions of family upbringing and the social situation of development, in general, are of great importance as factors in the emergence of the need for drug use. A comprehensive diagnosis of such a predisposition will allow identifying at an early stage those individuals who need immediate use of psychocorrectional methods.

Kryvolapchuk, Kulyk, Barko, Kalynovskyi, and Kosiak [7], studying the issue of criminogenicity of modern youth, note that addictive disorders in young people are a dynamic problem characterized by changing patterns of substance use and a high frequency of drug use experiments. According to some researchers [9, 11], optimal treatment should combine psychosocial therapies with appropriate pharmacological treatment, which expands the concept of care for this category of patients.

In addition, young people are a rather vulnerable category in choosing proven models for overcoming difficulties in their own lives. Behavioral methods of treatment of addictive disorders among young people include components that are aimed at self-regulation (e.g., overcoming difficulties and emotion regulation). The role of self-regulation as a way of treating addictive disorders manifested through major life stressors, the environment, etc. is emphasized [5, 10, 15].

Based on the research, we have developed practical recommendations for improving the complex of measures to counteract the spread of drug addiction among young people.

1. It is necessary to conduct systematic information and education work on the signs of drug addiction, as well as the peculiarities of its impact on physical and mental well-being to involve young people in the primary prevention of addictive behavior.

2. Introduce systematic conversations between social workers and young people enrolled in the group of enhanced psychological attention. At the same time, introduce the practice of conducting training ("problem-solving training"; "social role training"; "personal growth training"; "mental training", etc.).

3. Law enforcement officials should conduct regular police preventive measures to identify and neutralize places of possible distribution of drugs and their precursors.

4. Administrations of state institutions and educational institutions, as well as public health professionals, should carry out active information activities on healthy lifestyles among young people.

5. When determining individual measures to prevent and overcome drug dependence among young people, the choice of alternative ways to meet personal needs without using drugs (substitution therapy) should be promoted.

6. In working with drug-dependent young men, organize and conduct systemic rehabilitation measures to gradually stop further drug use: adaptive psychotherapy; family psychotherapy; motivational work; support during employment, etc.

## Conclusion

It has been established that the emergence and development of drug addiction in young people is primarily due to social (rejection of the individual, difficulties in establishing relationships in the team, self-expression, education, etc.), medical (physical and mental dependence, addiction) and psychological (emotional immaturity, poor adaptive abilities, a tendency to regressive behavior, difficulties in interpersonal communication) factors. This is confirmed by the priority motivational orientations of drug addiction among modern youth: pseudo-cultural motives; search for a source of positive emotions and new sensations; hedonistic motives; motives for deviant behavior as a result of getting rid of boredom, apathy, and "emptiness". For young people, these motives become stereotypes of their addictive behavior.

Measures to prevent and counteract the spread of drug use emerge full-blown, namely: conducting systematic information and education work among young people about the signs of drug addiction; organizing corrective measures with the most vulnerable categories of young people based on an individual approach; promoting alternative ways to meet personal needs without using drugs; organizing and conducting rehabilitation activities with drug-addicted young people to refuse further drug use.

*Prospects for further research are to investigate the impact of drug addiction on the state of physical and mental health of older people.*

## References

1. Aleksandrov D, Okhrimenko I, Medvediev V, Moiseieva O, Prontenko K. Psychoprophylactic correction of the individual psychological factors of narcotism. BRAIN. Broad Research in Artificial Intelligence and Neuroscience. 2020;11(2): 01–17. <https://doi.org/10.18662/brain/11.2/71>
2. Chicos O, Perri D, Capris L, Bulgaru Iliescu AI, Cristina K. Social-cultural influences and personality disorders favoring drug consumption. BRAIN. Broad Research in Artificial Intelligence and Neuroscience. 2019;10(3 Special Issue):21–27.
3. Eidenmueller K, Grimm F, Hermann D, Frischknecht U, Kiefer F, Dziobek I, Bekier NK. Exploring impaired insight in opioid addiction: The role of self-stigma. Heroin Addiction and Related Clinical Problems. 2022;24(2):45–51.
4. Estévez A, Jáuregui P, Sánchez-Marcos I, López-González H, Griffiths MD. Attachment and emotion regulation in substance addictions and behavioral addictions. J Behav Addict. 2017;6(4):534–544. doi: 10.1556/2006.6.2017.086
5. Farisco M, Evers K, Changeux JP. Drug Addiction: From Neuroscience to Ethics. Front Psychiatry. 2018; 9:595. doi:10.3389/fpsy.2018.00595
6. Feigenbaum J. Redefining dependency – a way forward. Personal Ment Health. 2016;10(4):325–327. doi: 10.1002/pmh.1359
7. Kryvolapchuk V, Kulyk O, Barko V, Kalynovskyi B, Kosiak N. Attitude of young people to the criminality problem in Ukrainian postmodern society. Postmodern Openings. 2020;11(1Sup1): 93–115. <https://doi.org/10.18662/po/11.1sup1/125>
8. Matthews S, Dwyer R, Snoek A. Stigma and self-stigma in addiction. J Bioeth Inq. 2017;14(2): 275–286. doi: 10.1007/s11673-017-9784-y
9. Morris NP, Bentzley BS. Supporting the use of medications for addiction treatment in us drug courts: Opportunities for health professionals. Journal of addiction medicine. 2020;14(4): 277–279. <https://doi.org/10.1097/ADM.0000000000000583>
10. Roos CR, Witkiewitz K. A contextual model of self-regulation change mechanisms among individuals with addictive disorders. Clin Psychol Rev. 2017; 57:117–128. doi: 10.1016/j.cpr.2017.08.008
11. Truong A, Moukaddam N, Toledo A, Onigu-Otite E. Addictive disorders in adolescents. Psychiatr Clin North Am. 2017;40(3):475–486. doi: 10.1016/j.psc.2017.05.012
12. Volkow ND, Jones EB, Einstein EB, Wargo EM. Prevention and treatment of opioid misuse and addiction: A review. JAMA Psychiatry. 2019;76(2):208–216. doi: 10.1001/jamapsychiatry.2018.3126
13. Wang SC, Chen YC, Lee CH, Cheng CM. Opioid addiction, genetic susceptibility, and medical treatments: A review. Int J Mol Sci. 2019;20(17):4294. doi:10.3390/ijms20174294
14. Yevdokimova O, Okhrimenko I, Filonenko V, Shylina A, Ponomarenko Y, Okhrimenko S, Aleksandrov D. The problem of unconscious aggressiveness of criminals in the conditions of postmodern society development. Postmodern Openings. 2020;11(2Sup1): 182–199. <https://doi.org/10.18662/po/11.2Sup1/186>
15. Zhyvotovska LV, Boiko DI, Kadzhaia NV., Shkodina AD, Demianenko IV, Borysenko VV. Association between emotional-volitional dysfunction and features of aggression or hostility in mens with different forms of substance addictions: a cross-sectional study. Wiadomosci Lekarskie. 2020; 73 (6): 1129–1133.

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