

Addiction, Rehabilitation, And Recovery Of Filipino Substance Abusers: A Phenomenological Inquiry

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Abstract

Drug Addiction is a disease that is not only highly stigmatized, but has also a very low recovery rate. Many people dabble with drugs and alcohol, and some continue to do so later in life, while staying reasonably healthy and productive members of society. However, for many people, this habit develops into a life-altering, severely debilitating, and all-too-often fatal sickness. Thus, this phenomenological inquiry investigated the experience of addiction recovery of fourteen Persons Who Used Drugs (PWUDs). The participants were asked to describe a circumstance regarding their awareness of their addiction, the rehabilitation and recovery experiences. This inquiry led to the development of the "Lotus model of recovery" which typifies the phenomena of addiction recovery arose from the findings of the study as a lived experience of fighting to lift oneself out of a pit of darkness and into the safety of light as the person undergoes significant changes in his way of life. The emerging lotus model in this study offers evidence-based information for framing better rehabilitation programs inclusive of services even after the rehabilitation through appropriate resiliency courses that enable clients to surpass events or situations that will trigger them to return to their addiction. Through this study, rehabilitation centers have a guiding path in planning proper actions to make resiliency programs for substance abusers possible.

Keywords: Addiction, Recovery, Rehabilitation, Substance Abusers.

Addiction, Rehabilitation, and Recovery:

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Recovered drug abusers have come a long way, from the hazy-eyed, saggy-skinned, filthy-clothed drug addicts with the sped-up walk and darting look, blindly stealing from homes, friends, and strangers alike, to the polite, well-dressed, empathetic souls sitting across the table, listening with care and responding with the weight of their past slowing each syllable. Addiction is a disease that is not only highly stigmatized, but has also a very low recovery rate (National Institute on Drug Abuse, 2018). Many people dabble with drugs and alcohol, and some continue to do so later in life, while staying reasonably healthy and productive members of society. However, for many

people, this habit develops into a life-altering, severely debilitating, and all-too-often fatal sickness (Cleveland Clinic Medical Professional, 2020).

Despite the fact that there are several theories, enormous sums of money invested, and numerous programs dedicated to addiction recovery, the problem persists. For some, even the definition of addiction is a hazy area. It might mean different things to different people, and it can have a different impact on their lives. The basic fact is that people still have a lot to learn about addiction and its treatment. There is a lot of conflicting pieces of evidence and information out there about substance abuse and rehabilitation, but one thing is certain - addiction can completely take over people's

lives and force them to do things they will never do otherwise. It also has a negative connotation (National Institutes of Health, 2017).

The general population views someone suffering from an addiction as a criminal rather than a sickness sufferer. They may be denied access to jobs, housings, or social groups. These people, like many others who suffer from a terrible illness, frequently feel powerless. Their viewpoints and thoughts are dismissed, their reality is canned, and their voices are frequently muted (Hogart, 2018). These people understand the hardships and struggles of addiction, as well as the joys of achievements, better than anyone else. They have a knowledge that may be able to help others break free from the shackles of addiction. These tales and voices are frequently ignored and suppressed, or at the very least, they are rarely invited to speak. Further, the rehabilitation process is driven by the situations and feelings that inspired motivation and realization. The "experts" can say whatever they want, and they may be correct, but it appears that no one knows the ins and outs of addiction rehabilitation better than someone who has experienced it first-hand. These are the actual professionals. "Clearly, service users have a thorough grasp and knowledge of their own health state, psychosocial difficulties, personal resources, support needs, and aspirations" (Neale et al., 2015).

Consequently, there were high number of relapse instances, the lack of resiliency programs, and the growing number of drug misused victims. This fact led the researcher to conduct a study exploring the lived experiences of substance abusers and answer the central question: "What characterizes the experiences of addiction, rehabilitation, and recovery among a select group of Filipino substance abusers? The end goal of this qualitative inquiry is to form a conceptual model for addiction, rehabilitation and recovery culturally unique to Filipino substance abusers. Essentially, we hope that our results would be able to offer evidence-based information that will serve as guiding path for rehabilitation centers in

preparing suitable activities to make resiliency programs for substance abusers.

Methods

Design

This study used a qualitative design specifically descriptive phenomenology in exploring Filipino substance abusers' addiction, rehabilitation and recovery experiences. Spielberg (1982) recognized three stages in descriptive phenomenology: intuiting (pondering), analysing, and describing (describing the phenomenon) experiences.

Participants

Eligible participants for this study were eleven males and three females representing the substance abusers and giving meaning to their lived experiences. In qualitative inquiry, Patton (2002, as cited by Clarke & Braun, 2013) emphasized that there are no rules for sample size as long as they are information-rich cases, which will explain the phenomenon under investigation. The criteria of selection were set as follow: (a) a Filipino citizen, (b) age ranges from 18 to 59 years old, (c) certified to have recovered from drug addiction at a rehabilitation facility, (d) participant in an after-care program, (e) must have experienced trauma of any form, and (f) a resident of Metro Manila. Those who were still in the process of rehabilitation and did not complete the 6- to 8-month period and decided to go out of the center were not qualified.

Measures

Based on the research objectives, a two-part research questionnaire was used to gather the needed data and essential information. In part one, a personal data sheet was used to collect personal details of participants such as student's age, gender, and marital status. Part two of the research questionnaire was an aide memoire that was used to guide the semi-structured interview. The aide memoire consists of a series of questions to capture the lived experiences of

the Filipino substance abusers. The interview guide is process-oriented, revolving on the participant's experience (Villamor et al., 2016) as well as to investigate issues in depth in order to gain full knowledge (Neubauer et al., 2019). Further, the aid memoire looked primarily into the addiction, rehabilitation and recovery experiences of the participants.

Procedure

The researcher obtained the approval of the University of Santo Tomas authorities and the ethics review committee before administering the questionnaires and conducting the interview. Permission from the Department of Health (DOH) and the rehabilitation facilities – the Quezon City Drug Treatment and Rehabilitation, Caloocan City Anti-Drug Abuse Office (CADAO) and the Treatment and Rehabilitation Center at Camp Bagong Diwa in Bicutan, Taguig City was also sought before data gathering. Upon approval, the researchers were assisted by a licensed psychologist in the administration of the questionnaires and the conduct of the interview.

Moreover, the researcher conducted an intensive interview or inquiry with the fourteen (14) participants who met the inclusion and exclusion criteria of the study. The interview was also recorded with the consent of the participants and other concerned authorities, as evidenced by their signatures in the consent form. In order to complete the interview, the researchers took field notes comprising of crucial facts linked to the research objectives so that they would not overlook useful components of the natural data gathered during the interviews. This was done to ensure that the original content of the data obtained would be preserved during abstraction. After the participants had completed all the questions, the interviews ended. The researchers thanked the participants for their time and cooperation during the interviews as they wrapped up the activities. The interview yielded narrative results of the participants' lived experiences, which were transcribed, coded, and grouped

into themes. The researchers then had a follow-up discussion with the participants to confirm the data. Validation strategies were done with the themes that emerged in this study.

Consequently, to protect the rights and dignity of the participants, they were assured with utmost confidentiality of the data gathered. In case, a participant became uncomfortable during the interview for any reason, the interview would be terminated and a distress protocol was prepared. Before the interview, the participants were fully debriefed, and requested to stay for 15 minutes so that a professional psychologist with appropriate training and skills might assist them.

Data Analysis

To acquire a general sense of the topic, the researcher first familiarized herself with the data through the semi-structured interview transcriptions. Relevant remarks which were directly related to the phenomenon being researched were identified through reading and re-reading. The significant statements were then deduced into brief, dense statements, retaining only the fundamentals in order to create a core structure for the phenomena, categorized and were grouped into themes. Then, each cluster of themes was coded to include all developed meanings associated with that set of meanings. The phenomena were described in detail, taking into account the motifs that had been identified. The researcher then reduced the lengthy descriptions. The validity of the findings was then checked using the member-checking validation strategies such as triangulation. This is to ensure the trustworthiness as well as the truthfulness of the gathered data (de Guzman & Tan, 2007 as cited by Serrano et al., 2022).

Results

Interestingly, from the significant stories provided by a select group of Filipino substance abusers, this study successfully afforded the development of the Lotus Model of Addiction,

Rehabilitation and Recovery of Filipino Substance Abusers (see Figure 1).

Like the lotus flower, this model characterizes the experiences of substance abusers as they hold their selves above the mud and water (drug addiction) and gradually detached their attachment from what causes

them the illness or imperfections and produce new buds which symbolize their hopes and dreams for a better future. It consists of three distinct but interrelated themes: Realizing (Get through) experiences, Purifying (Get On) experiences, and Recuperating (Get Over) experiences

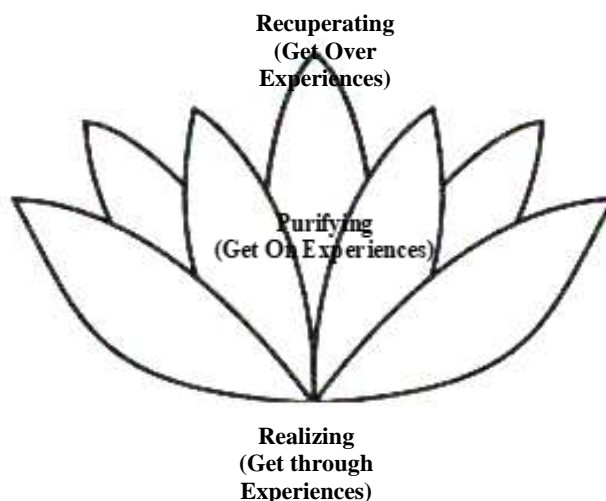


Fig. 1 The lotus model of addiction, rehabilitation, and recovery of selected Filipino substance abusers

Realizing (Get through) experiences

In this study, as the substance abusers have realizations why they engaged into drugs, they take note on long they have been doing it and the reasons behind. As they verbalized by the participants: "I know they were my friends, so when they asked me to try...i did. I know it's not well but my mind says just try". (P2) "I do not know what to do else with my life. I am very down, confused. I have nowhere to go, until I try drugs." (P5)

They also knew very well who introduced drugs to them and why they hooked into it. They see it as part of releasing their struggles, pain and sufferings. As affirmed: "I felt lost. I was just 20 years old then, I ran away from home and felt like my friends will be the only one to cheer me up. They asked me to try vices, worst, they introduced me to drugs...This continued until I realized but was too late." (P9) "I have this light-feeling when I

am with my friends...we're enjoying what we are doing without minding our families and other responsibilities in life." (P2) "Once you used it, it just hits different...I become carefree in everything. It seems like the best days of my life but eventually my health declines...I have been hospitalized and almost died." (P9)

They knew that there were changes happening in their physical, mental, emotional, and psychological state. These are evident in their actions and behavior. As described by the participants: "I feel numb and do not feel anything when I'm on high...I also encountered accidents because I'm on drugs but I don't experience pain."(P12) "When I started using drugs, I am very sensitive to any words that I am hearing most of the time. ...even the simplest remarks make me feel irritated...I also hit my wife and children". (P8) "My mind is in a blank state when I did some horrible mistakes (uploaded a nude picture of my wife) in the

social media. I threaten her to destroy her reputation if she will not give me money for my drugs...I become worst and irrational. My wife leaves me.” (P5) “My two children were bullied at school because their father is a drug addict...even teachers are saying something behind our back as a family. I freaked out and go to school and throw stones on the classrooms. They sued me.” (P7)

Consequently, these are also the experiences where they gradually notice the impact of what they are doing to their families and to their lives. This result is affirmed when one of the participants shared: “My family hates me when they discovered I’m using drugs... I am cursed by my family...They even wish me to be dead because of my vices.” (P2) “My child had to stop from schooling and opted to work because I cannot support him anymore. My wife always cries because our family is struggling financially.” (P2)

Summarily, the users become aware what is happening around them as they have realizations why they engaged into drugs, how drugs have impacted their physical, mental, emotional, and psychological states as well as their relationship with their families is referred to as the realizing or get through experiences of the Filipino substance abusers.

Purifying (Get On) experiences

In this study, it is interesting to note that when the participants decide to enter the rehabilitation center, their thoughts were filled with positive expectations and hopes. As verbalized: “I am here for a purpose and that is to be better and I know I can.” (P2) “I will be gaining much from being here, the staffs are very accommodating, and they were concerned with our well-being.” (P11)

Apparently, there were also instances where their patience was tested and they were tempted to leave the rehabilitation center. As verbalized by one participant, “being in a new environment is very challenging. I almost

cannot bear it. At night I cry, this way I unload my fears and burdens and life.” (P5) Another one said: “it is very hard to be away from my family, I miss them so much. It is very hard but I know this is sacrifices will be for the good of all.” (P9).

Their moments include homesickness, sleepless nights, and silent cries. However, they claimed that it was only during the first three months of their stay in the rehabilitation center as shared; “It was very hard at first especially the first three months of stay, but as months goes by, everything becomes natural and we get used to it.” (P1) “It involves a lot of sacrifices, missed special occasions of family but all those makes us stronger and it motivates us to do and be well.” (P12)

Moreover, the participants gradually experience the change in their behaviour and beliefs. They were inclined with religious practices and their self-discipline was developed. As participants shared: “I am not a religious person when I entered the center, but I really learned how to pray, not just basically pray but offer my whole life to Him.” (P8) “I become so self-conscious that I realized my wrong doings. Self-discipline is the key. It is always inculcated in our minds. They were right when they say, if you want to change, always have self-discipline.” (P4)

The participants view on staying in the rehabilitation center also becomes clear to them. They described it as an entry point for change and start counting the benefits that they will gain. As verbalized by one participant: “We appreciate being in the rehabilitation center because not only that we are changing for the better but because there is a new hope that we will become a renewed person after all of this.” (P3) We hope that every person like us will have the courage to get in to this rehabilitation center. It feels different coming in here and going out. It is challenging yet very fulfilling.” (P11)

The participant's experiences of performing and making progress in their mind, conduct and view is referred to in this study as purifying or get on experiences.

Recuperating (Get Over) experiences

While the participants become more aware how they are progressing, they also begin to visualize how progression looks like when they are outside the rehabilitation center. They engaged into many activities to stay away from drug addiction such as attending zumba sessions, and doing family therapy, psychological uplifting, and faith-based interactions. As verbalized by one participant: "Focusing on every activity is part of my recovery process. I became very active and enjoyed everything that we are doing." (P3)

Additionally, when they were finally discharged from the center, their families and community were very supportive of them. They were able to return to work and had been helpful to other people. As one participant shared: "I received a job from our barangay captain, and I eventually got it permanently...I feel worthy again and my life has more direction." (P7)

They also described their lives at present as happy because they got over their drug addiction problem. Others replied that they were able to know the Lord better, they brought back the trust of their family and friends, they could walk in the community with head held up high, their lives became peaceful, good, and quiet. They were able to gain many friends and even landed a job in their barangay, and felt that people trust them again. One person shared this: "I have claimed again the trust of my family and children. They are proud of me." (P7) "I can feel that my family was very supportive of me and the people around me. Their dealings with me became better and I feel reunited with them." (P14)

Interestingly, their mind set is also changed. They were trying to make everything right. Their goals are very clear to them now

that they feel and think that are recovered or are recovering. As verbalized:

"I want to serve my family and the church. I want to fill in every missed moment with them." (P3) "My experience of using drugs is something that I will never ever look back. I want a new me-away from my old friends. I am avoiding friends who bad influencers are telling them that they cannot get any good from taking prohibited drugs." (P10)

It is motivating to know that the participants engaged themselves for a change-letting go of some of their usual habits and thereby avoiding to use drugs. They feel more capable of doing things that they wanted to do before. Their lives went well as they acknowledge their weaknesses that might tempt them again to use drugs and invest more in their strengths to stay resilient. This experience is referred to in this study as the recuperating or get over experiences.

Discussion

Considering the global health issue on drug addiction, which poses a threat to users and their families, addiction, rehabilitation and recovery experiences of substance abusers is worthy of investigation. Thus, our study intends to provide valuable aid in understanding the lived experiences of these Filipino substance abusers. Notably, the qualitative findings through a phenomenological inquiry resulted in the Lotus Model of Filipino Substance Abusers' Recovery.

Interestingly, three (3) themes of substance abusers experiences surfaced in this study. First, the Realizing (Get through) experiences which refers to the Filipino substance abusers' awareness of what is happening around them, as they have realizations why they engaged into drugs, how drugs have impacted their physical, mental, emotional and psychological states as well as their relationship with their families. Previous studies have recognized negative peer pressure as influential in trying alcohol and/or drugs

(Hartney, 2020). The participants' social group to which they socially associate are likely to be made up of drug addicts who influence them to use drugs as part of their socializing event (Cassiobury Court, 2022). Additionally, the participants have done things they will never do otherwise, which affect not only their families but also their whole life (National Institutes of Health, 2017). They experience loss and longing for their families while having feelings of regrets and surrender (Co & Canoy, 2020). Some of the behavioural problems that drugs abusers experience were unemployment, accidents, and involvement in criminal acts. This happens because of paranoia, aggression and impaired judgment while they are under the influence of drugs (Gateway Rehab Center, 2022).

Further, there are many challenges that drug abusers encounter such as denied access to jobs and other benefits which makes them feel inferior. They are even viewed as someone who is criminal than someone who is suffering from an illness (Hogart, 2018). Indeed, these experiences led the drug abusers not only highly stigmatized, but also having a low chance of recovery (National Institute on Drug Abuse, 2018) as they face challenges of their addiction.

Second, the Purifying (Get On) experience in this study highlights the experiential learning of the Filipino substance abusers during rehabilitation. They affirm making progress in their mind, conduct and view. Since addiction has been proven as a neurological disease, it can pass through phases of relapse and remission (University of Rochester, 2022). As when the substance abusers were purified, they are free from any unnatural impulses, forget frustrations and learn to returns to what is right. The participants' acknowledgement of needing assistance from the rehabilitation center to overcome their addiction is a big leap forward for them to change. The different activities given in the rehabilitation center is aimed at rebuilding a

new and healthy life for drug abusers that is free from addiction (Cirque Lodge, 2022). Similarly, Juergens (2021) described addiction as much more than a chemical need and based on lifestyle influenced by other factors that leads to drug usage. These experiences were described by the drug abusers as something difficult but at the same time happy with a hopeful note that their lives will change and had a direction or meaning inside the rehabilitation center. Moreover, there is also an evident change in their conduct as they inhibit more of a drug and criminal-free behaviour as compared to their previous lifestyle (Fullam, 2020).

Consequently, as the substance abusers in this study finish their stay in the rehabilitation center, their road to recovery from addiction to have a sober life started. They admitted it was very challenging but what they learned inside the rehabilitation center is something that prepared them to face life again outside. These findings support the study of Neale and colleagues (2015) that viewed rehabilitation process as something that inspires motivation and realization. Drug abusers will return to normal life after finishing detoxification and rehabilitation (Addiction Center, 2021). Though it has been reported that majority of relapses happen within the first six months after therapy (Ackermann, 2022), the participants are prepared to face the challenges ahead. This represents the Recuperating (Get Over) experiences of the participants which refer to the development of their resiliency by acknowledging their weaknesses and dwelling more on their strengths to resist drugs.

The researcher was motivated to conduct this study because of the high number of relapse instances, the lack of resiliency programs, and the growing number of drug misused victims. There is a need to guarantee that rehabilitation institutions around the country continue to provide services even after the clients have completed their treatments by providing suitable resiliency sessions that help them to overcome events or situations that may

prompt them to relapse. Rehabilitation centers will have a guiding path in preparing suitable activities to make resiliency programs for substance abusers practicable as a result of this study

Conclusion, Theoretical contributions, and Practical implications

This study intended to examine the lived experiences of addiction, rehabilitation and recovery of Filipino substance abusers. Interestingly, the Lotus Model of Addiction, Rehabilitation and Recovery that emerged vividly from the phenomenological inquiry describe three interrelated themes that Filipino substance abusers were experiencing, namely: Realizing Experiences, Purifying Experiences, and Recuperating Experiences.

The emerging lotus model in this study offers evidence-based information for framing better rehabilitation programs inclusive of services even after the rehabilitation through appropriate resiliency sessions and programs that enable clients to surpass events or situations that will trigger them to return to their addiction. Through this study, rehabilitation centers have a guiding path in planning proper actions to make resiliency programs for substance abusers possible.

Furthermore, this study expands awareness of drug addiction, rehabilitation and recovery as the participants of this study were able to express and communicate their concerns about their experiences. They benefited from this study, as these experiences strengthened their resiliency, self-efficacy, and skills toward a restorative and transforming way of life.

Limitations and Future directions

While this study provides good insights, it should be understood with the following limitations and recommendations. First, the participant sample is delimited to Recovering drug users at national capital region only, thus narrowing its scope. It is then suggested that a study be conducted in other regions with

treatment rehabilitation centers so as to compare the experiences in various localities and different cultural contexts. Second, participants' history of familial and genetic factors on drug use was not included in the inquiry as well as the exploration on the type of treatment given in the rehabilitation center. Future researchers are encouraged to analyse these factors as they might shed light on the greater impact on the recovery experiences of Filipino substance abusers.

As a general recommendation, the results of this study suggested that there is a need to review and strengthen programs for effective treatment and recovery of Filipinos who use drugs. Based on scientific evidence, many drug users in the Philippines do not have access to rehabilitation centers, and consequently, have been deprived from accessing the benefits of treatment. The consideration of policy makers to health and well-being of persons who use drugs are beneficial for their continuous and effective recovery and social reintegration.

Declarations

Funding: No funding was received for conducting this study.

Conflicts of interest/Competing interests:

The authors have no conflicts of interest to declare relevant to the content of this article.

Availability of data and material: not applicable

Code availability: not applicable

Ethics approval: All procedures performed in the present study that involved human participants were observed, per the ethical standards of the Ethics Board of the University of Santo Tomas Graduate School.

Consent to participate: Each participant in the current study gave informed consent before

participating. In addition, participants were briefed on the nature of the study, were assured that all data collected would be kept confidential, and that participation was purely voluntary without remuneration.

Consent for publication: not applicable

References

- Ackermann, K. (2022). Warning Signs of Relapse: Depression, Stress, and Other Triggers. *Adult Addiction Treatment Programs/Signs Of Relapse*. <https://americanaddictioncenters.org/adult-addiction-treatment-programs/signs-of-relapse>
- Addiction Center (2021). What Happens After Rehab? <https://www.addictioncenter.com/treatment/life-rehab/>
- Cassiobury Court (2022) Peer Pressure and Drug Addiction. <https://cassioburycourt.com/2019/01/peer-pressure-and-drug-addiction/>
- Cirque Lodge (2022) Drug Rehabilitation as an Experience, Not a Punishment. <https://www.cirquelodge.com/drug-rehab/experience/>
- Clarke, V. & Braun V. (2013). Successful Qualitative Research: A Practical Guide for beginners. https://www.researchgate.net/publication/256089360_Successful_Qualitative_Research_A_Practical_Guide_for_Beginners
- Cleveland Clinic Medical Professional (2020). Drug Addiction. <https://my.clevelandclinic.org/health/diseases/16652-drug-addiction>
- Co, T. & Canoy, N. (2020): The lived experiences of recovering Filipino persons who use drugs (PWUDs) without family support, *Journal of Ethnicity in Substance Abuse*, 1-21. DOI: 10.1080/15332640.2020.1861493
- Fullam, M. (2020). Drug users' experiences of a residential rehabilitation program in Western Australia: A thematic analysis of drug users lived experiences. <https://ro.ecu.edu.au/theses/2361/>
- Hartney, E. (2020). How Peer Pressure Influences Addiction. <https://www.verywellmind.com/what-is-peer-pressure-22246>
- Hogarth L (2018 in press) A critical review of habit theory of drug dependence. In: Verplanken B (ed) *The Psychology of Habit*. Springer
- Juergens, J. (2021). Life After Rehab. The journey to recovery doesn't end after you leave the treatment facility. It's a lifetime of commitment with many people around to help you succeed. <https://www.addictioncenter.com/treatment/life-rehab/>
- National Institute on Drug Abuse (2018). What Is Addiction?: Causes, Risk Factors & Models. <https://americanaddictioncenters.org/rehab-guide/is-drug-addiction-a-disease>
- National Institutes of Health (2017). Dealing with Drug Problems: Preventing and Treating Drug Abuse. <https://newsinhealth.nih.gov/2017/06/dealing-drug-problems>
- Neubauer, B.E., Witkop, C.T. & Varpio, L. (2019). How phenomenology can help us learn from the experiences of others. *Perspect Med Educ* 8, 90–97. <https://doi.org/10.1007/s40037-019-0509-2>
- NIDA. (2018, July 2). Media Guide. Retrieved from <https://archives.drugabuse.gov/publications/media-guide> on 2022, February 28
- Serrano, J., Reyes, M. & de Guman, A. (2022). Psychological distress and coping of Filipino University students amidst the global pandemic: a mixed-method study. *Frontiers in Journal of Positive School Psychology*, 6, 373-386.

<https://www.journalppw.com/index.php/jpsp/article/view/6918>

Villamor, N. J., de Guzman, A. B. & Matienzo, E. T. (2016). The ebb and flow of Filipino first-time fatherhood transition space: A grounded theory study. *American Journal of Men's Health*, 10, 51-62.
doi:10.1177/1557988315604019