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# Paradigmatic Model of Drug Use Prevention Among Rural Youth (A Case Study of Orzooieh Villages, Kerman City)

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#### Abstract

This study aims to present a paradigmatic model for preventing drug use among youth in the Orzooieh villages of Kerman City. The research is applied in nature and is cross-sectional in terms of time. Methodologically, it is qualitative, utilizing grounded theory as outlined by Strauss and Corbin. The study population consisted of rural experts and villagers, with data collection continuing until conceptual saturation was achieved, which was possible with 10 participants. The instrument used was semi-structured interviews. The validity of the research was ensured through data triangulation, and reliability was confirmed with an agreement coefficient of 0.72. Qualitative data analysis was conducted using MAXQDA software, version 20.

The findings revealed 200 open codes from interview texts, including 21 contextual factors, 11 intervening factors, 21 strategies, and 9 consequences related to the central phenomenon of widespread drug use among rural youth. The results indicated that among the most significant contextual factors were economic conditions, lack of employment, and shifting values toward consumption. Intervening factors included cultural-social adaptation to drug use, psychological impacts, and inadequate planning by authorities. Consequences of neglecting prevention efforts included youth migration from rural areas, lack of realism, inability to form families, and family disruption. The most important proposed strategies included empowering youth, creating supportive environments, enhancing social cohesion, and changing consumption values.

*Keywords:* Drug Use Prevention, Rural Youth, Cultural-Social Adaptation, Psychological Impacts, Lack of Realism.

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#### 1. Introduction

Drug addiction is a social issue with global ramifications. The increasing statistics on drug use in today's world have made it one of the most pervasive substances that has easily infiltrated human life. All societies are grappling with a growing demand for and supply of drugs, evidenced by a 32% increase in drug users over the past 14 years, resulting in at least 275 million people worldwide using narcotics and psychoactive substances. The prevalence rate of drug use among the 15 to 64-year-old population has reached 7% (Sarani, 2012: 63). The 2021 annual report by the United Nations Office on Drugs and Crime also highlights that approximately 275 million people used drugs, and over 36 million suffered from drug use disorders (Rahbari et al., 2023: 83).

This widespread issue has led countries to pursue various strategies to address it, with prevention being one of the emphasized solutions. Preventing addiction has been a proposed strategy by experts to overcome this widespread problem. Addiction is a psychological and sometimes physical condition caused by the influence of a drug on a living organism, resulting in specific behaviors and reactions in the individual. This condition is always accompanied by an excessive urge for the continuous or periodic use of that particular drug, so much so that the individual can experience the therapeutic effects of the substance or alleviate the discomfort caused by its absence (Bayati et al., 2017: 18). Although definitions of addiction vary, three main characteristics are consistently observed across all types of addiction: 1) the need to consume a chemical substance, the absence of which causes specific conditions in the individual, 2) the increased use of the drug to achieve the same effects and quality that were experienced in the past with lower doses, and 3) physical and psychological dependence on the substance (Yekani Haft Lang, 2011: 25).

Addiction is often associated with industrialization and urbanization, although drug use in Iran has a long history, with plants used to produce hashish and opium being native to the country (Motiee Langroudi et al., 2013: 69). Recent studies indicate that changes have occurred in structures such as customs, beliefs, values, ideals, norm acceptance, and norm creation. Consumption patterns, household items, home decorations, food, and clothing have drastically changed in recent years. These changes in rural society have

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been so rapid that sociologists now use terms like "urban village" and "urban villagers" to describe large settlements. The vast scope of changes has significantly impacted the prevalence of individual problems such as drug addiction (MohseniTabrizi and Sharafat, 2010: 95).

In Iran, rural youth are among the most vulnerable groups to addiction. The reasons for drug use among rural youth are numerous. Over the past halfrural society has undergone significant transformations, which, in some ways, have been harmful and accompanied by anomic conditions. Land reforms, rural-urban migration, increased cultural, economic, and social connections between cities and villages, literacy development, urban population growth, urbanization, the expansion of mass media, and similar factors have increasingly affected and disrupted rural society. Additionally, as a transitioning society, rural areas have experienced changes and transformations in their way of life and fundamental cultural values over the past fifty years (MohseniTabrizi and Sharafat, 2010: 96). Cultural characteristics have also been one of the factors contributing to the growth of drug use. For instance, in rural areas of our country, drug use was primarily prescribed for treating illnesses. Mohseni Tabrizi (2011) identifies factors such as income level, education, suppressed desires, easy access to drugs, the spread of media in rural areas, and the collapse of the rural livelihood system as contributing factors. Hajarian and Ghanbari (2013) emphasize family conflicts, dependency on family, feelings of anomie, religious issues, interactions with drug users, environmental pollution, and distance from urban centers as the most significant correlates of drug use among rural residents.

Given the limited research on factors influencing drug use in rural populations, this study aims to examine the impact of individual, familial, medical, social, cultural, and structural factors on the tendency to use drugs among rural residents. In the discussion of the causal factors of addiction in rural areas, depending on the theoretical perspective and discourse being examined, different results have been presented. Often, these are equated with theories of deviance and delinquency. In new discourses, drug use and the user are viewed as a patient rather than a criminal or sinner. This humanistic

approach seeks to treat this illness and protect the addict from punishment (Bayati et al., 2017: 45).

It has been established that sufficient research has been conducted on the causal factors of addiction, and it is even clear to researchers that addiction can be explained by norms and social analyses. However, what plays a crucial role in solving significant problems like addiction is focusing on prevention, as it is always the best solution and treatment and will reduce the financial and emotional burden on society. Considering that the addiction prevalence rate in Kerman Province is higher than the national average, it can be said that preventive measures have not been seriously implemented and followed. Moreover, this situation is exacerbated by the province's proximity to drug trafficking routes from Afghanistan, Pakistan, and Sistan and Baluchestan Province, which enter Kerman through three routes. Consequently, Kerman Province's rural areas have not been spared from harm, especially villages in the southern part of the province, such as those in the orzooieh district. The addiction problem in the rural areas of orzooieh is so severe that the Welfare Organization has designated more than 20% of the villages as addiction crisis villages due to the high number of addicts (Kerman Welfare Center, 2023).

According to local residents and health centers, more than 30% of rural residents, especially the youth, use drugs as a topic of conversation and entertainment during gatherings. Addiction has led to the erosion of the role and significance of villages in the economic, social, and political development of cities. On the other hand, it hinders the development and progress of rural areas. The emphasis on developing and advancing rural areas is not only because most of the population in the Third World resides in rural areas but also because improving rural environments is the only solution to urban problems like unemployment and urban population congestion (Azkia, 2012: 33). Given the critical role that villages play in the development and improvement of urban communities, it is important to note that addiction has created numerous issues in these rural areas, including increased unemployment. While these villages did not face unemployment issues two decades ago, the addiction of the youth has now made unemployment widespread. Employers are reluctant to hire addicted individuals, preferring to

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recruit workers from neighboring cities, which has exacerbated cultural problems caused by the influx of non-native migrants. Additionally, both material and non-material crimes have increased, and social issues such as divorce, which were uncommon in this region, have also risen. Given the current state of addiction in Kerman's rural areas, particularly in the orzooieh district, this research seeks to answer the question of what model can be proposed to prevent drug use among the youth in the rural areas of orzooieh, Kerman?

#### 2. Review of Literature

Kiani et al. (2022) in their article "Cultural Factors Influencing Relapse Among Self-Identified Addicts in Andimeshk County" explain that among the 17 items of cultural factors, encouragement from peers to reuse substances and spending leisure time with unhealthy activities had the greatest influence on relapse, while incarceration and discrimination between children had the least impact. The effective cultural factors on relapse include peer encouragement to reuse substances, spending leisure time with unhealthy activities, labeling, lack of follow-up by relevant agencies, absence of programs for leisure activities, positive beliefs about drug use for alleviation and treatment, and lack of awareness about the nature of new drugs.

Safari and Haghi (2021) in their study "Qualitative Study of Social Factors in Drug Addiction: Case Study of Drug Addicts in Kalibar City" found that a total of 9 factors are involved in drug addiction: differential association, economic poverty, cultural poverty, social poverty, psychological trauma, differential family, harmful environment, psychological and emotional challenges, and social exclusion. Among these factors, social factors play the most significant role in addiction, while psychological factors have a more indirect role. Strategies for treatment and prevention include job creation, strengthening social bonds and cohesion, enhancing awareness programs about the consequences of drug use, teaching life skills, and improving law enforcement and security. Afshani et al. (2021) in their study "Exploring the Social Contexts and Consequences of Hookah Use Among Youth" show that hookah use in society and among families is socially accepted and is becoming a legitimate tool for recreation and leisure. Families and differential family

contexts provide a conducive environment for hookah use, highlighting the need for increased attention to cultural and value changes in families and the creation of new recreational and leisure opportunities for families. Babayi and Najafi Asl (2018) in their study "Study of Factors Leading Rural Youth to Substance Abuse: A Case Study of Villages in Delfan County, Lorestan Province" found that social support for substance abuse, stemming from local subcultures and structural factors, has facilitated drug use. Social factors such as previous disputes in the village, employment status, and leisure time activities have influenced the persistence of substance abuse. According to the findings, the presence of an informed and skilled village head with the necessary infrastructure for educating villagers and engaging them is crucial to prevent the spread of substance abuse. Pour lema and Mohseni Tabrizi (2017) in their study "Sociological Explanation of the Causes and Influencing Factors of Risky Behaviors in Rural Areas of Gilan Province (Case Study: Substance Abuse and Addiction in Rural Areas of Ashkourat, Rahimabad District, Roudsar County)" found that the best predictors of rural substance abuse are, in order, environmental factors, cultural factors, rural transformations, family factors, economic factors, social factors, biological and medical factors, and individual factors. In the field of Latin research, Hochstetler and Peters (2023) in their study "Geography of Drug Overdose Deaths: A Multi-Substance Perspective" show that drug use patterns differ between urban and rural areas in the United States. Urban areas face issues with amphetamine use, while rural areas struggle with prescription drug abuse, indicating that a national policy is not equally effective across all regions. Faizan Akbar et al. (2023) in their study "The Rising Trend of Gabapentin Abuse Among Drug Addicts in Rural Punjab" found that substance abuse among rural populations has increased due to lack of employment and income compared to urban areas. Brust and Cruz-Diher (2023) in their study "Medications for Opioid Use Disorder in Rural U.S.: A Critical Review of the Literature, 2004-2021" explain that barriers to prescribing medications for opioid use disorder in rural areas include limitations in the number of qualified prescribing physicians and difficulties in evaluating the quality of Medications for Opioid Use Disorder (MOUD) in rural settings. Further studies are needed to explain the existing themes and

improve the quality of treatment for individuals with substance use disorders in rural areas. Dawes et al. (2023) in their study "Comparing the Effectiveness of Cognitive-Behavioral Therapy and Brief Interventions on Relapse Prevention in Drug Addicts" state that cognitive-behavioral therapy is more effective compared to brief interventions.

In summary, existing research shows a significant amount of work has been done on the causal and intervening factors of addiction in urban and rural communities. However, there is a gap in research specifically on addiction prevention for youth, especially in rural areas, and research using qualitative methods, particularly grounded theory, is limited.

# 3. Methodology

This study is applied in nature, cross-sectional in terms of time, and employs a qualitative methodology using grounded theory as developed by Strauss and Corbin. The study population includes rural experts such as village heads, council members, and villagers. Data collection continued until conceptual saturation was achieved, which was possible with 10 participants. Validity was ensured through confirmation by involved individuals, data triangulation, and reliability was confirmed with an agreement coefficient of 0.72, indicating acceptable reliability. Interviews began with members of the village council, and the interview questions were as follows:

- Can you discuss the extent and nature of drug use in this village?
- In your opinion, what factors contribute to increased drug use in this village?
- Are these factors related to culture, economy, social issues, or other aspects?
- Can you share personal experiences or observations about the impact of drug use on your village?
- What suggestions do you have for reducing drug use and increasing awareness among individuals?
- Are there programs in the village aimed at preventing drug use?
- What experiences with drug prevention programs elsewhere might be applicable to this village?

• Do cultural and village values play a role in resisting drug use?

Data collected from interviews were analyzed using MAXQDA software, version 20.

Table 1. Participants in the Interviews

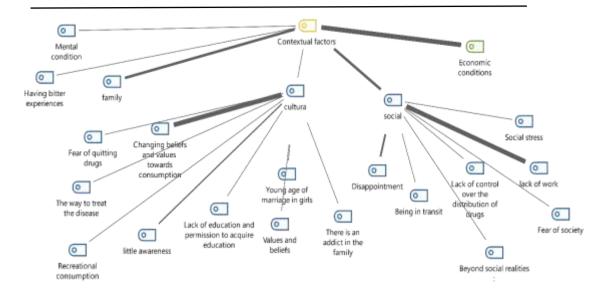
| Members of the Village Council (including Amirabad, Orzooieh, DehSard, Soughan, and Vekilabad) | 5 individuals                  |
|--|--------------------------------|
| Villagers involved with drug abuse   | 4 individuals (3 men, 1 woman) |

# 4. Findings

The findings from the interviews, analyzed using five codes, led to the development of a paradigm model. In the initial step, the extracted indicators related to contextual factors that hinder drug prevention among youth were identified. The following table and diagram illustrate these findings.

**Table 2. Core and Selective Codes of Contextual Factors** 

| Core Codes   | Selective Codes    |  |
|--|--------------------|--|
| Economic Conditions Social (social stress, lack of     | Contextual Factors |  |
| jobs, uncontrolled drug distribution, social fear,     |                    |  |
| escape from social realities, hopelessness, being on a |                    |  |
| drug transit route) Cultural (presence of an addict in |                    |  |
| the family, early marriage age for girls, lack of      |                    |  |
| education and opportunity for education, values,       |                    |  |
| changes in beliefs and values towards consumption,     |                    |  |
| recreational use, fear of quitting, using drugs as a   |                    |  |
| form of treatment) Family Having negative              |                    |  |
| experiences, Psychological Conditions                  |                    |  |

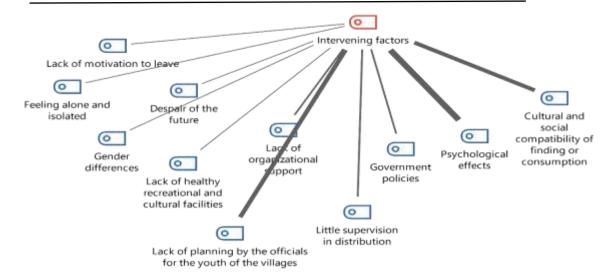


#### **Diagram 1. Contextual Factors**

As shown in Table 2 and Diagram 1, the contextual factors that complicate drug prevention among youth include six main categories: cultural, social, economic, psychological, familial, and past negative experiences. The cultural factors encompass issues such as fear of quitting drugs, values and beliefs related to drug use, early marriage age, the presence of addiction in the family, lack of educational opportunities, drug use as recreation, and using drugs as a form of treatment. These issues stem from cultural ignorance and limited awareness of the consequences of drug use among the youth. Social factors like hopelessness, using drugs as an escape from social and economic realities, social stress, fear of social interactions, lack of employment, and the village's location on a drug transit route are also significant.

Table 3. Core and Selective Codes of Intervening Factors

| Core Codes    | Selective Codes  |
|---------------|--|
| Psychological | Hopelessness about the future, lack of motivation to quit, feelings of loneliness and  |
| Impacts       | isolation, cultural and social adaptation to drug use, inadequate planning by authorities, lack of organizational support due to governmental policies, gender-based disparities in drug use |

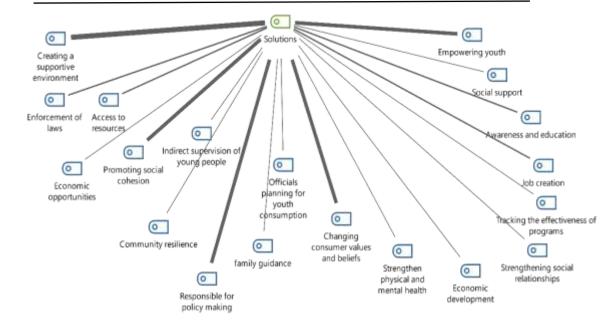


## **Diagram 2. Intervening Factors**

Table 3 and Diagram 2 reveal that the factors disrupting drug prevention efforts include psychological impacts such as hopelessness about the future, lack of motivation to quit, feelings of loneliness and isolation, and adaptation to cultural and social norms related to drug use. Additionally, inadequate planning by authorities for the youth, insufficient oversight in drug distribution, lack of organizational support, and policy-related issues, along with gender-based differences in drug use, play significant roles.

**Table 4. Core and Selective Codes for Solutions** 

| Core Code  | Selective Codes  |
|------------|--|
| Empowering | Enhancing social cohesion, creating a supportive environment, changing values and  |
| Youth      | beliefs about substance use (e.g., viewing it as a treatment, a recreational activity),  |
|            | accountability in policy-making for rural planning, social support, awareness and education, job creation, monitoring the effectiveness of programs, attention to economic development in villages, improving physical and mental health, planning by officials, and creating economic opportunities, group and collective education |

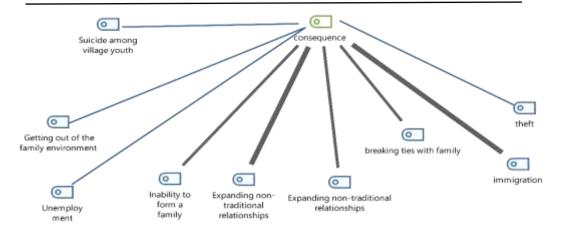


#### Diagram 3. solutions

As shown in Table 4 and Figure 3, the most frequently mentioned solutions include empowering youth, enhancing social cohesion, creating a supportive environment, and changing values and beliefs about substance use (e.g., viewing it as treatment or recreation). Additionally, social support, awareness and education, job creation, monitoring program effectiveness, attention to economic development in villages, improving physical and mental health, planning by officials, creating economic opportunities, and group and collective education are also crucial solutions for preventing substance abuse in these villages.

**Table 5. Core and Selective Codes for Consequences** 

| Core Code    | Selective Codes   |
|--------------|---|
| Consequences | Expansion of unrealistic attitudes towards life, migration of youth, disruption of family |
|              | bonds, proliferation of non-normative relationships and ethical issues, inability to form |
|              | families, unemployment, alienation from family, theft, increased suicide rates            |



## Diagram 4. Consequences

Table 5 and Diagram 4 illustrate the consequences of not addressing substance abuse prevention, including unrealistic attitudes towards life, migration of youth to surrounding cities, disruption of family bonds, proliferation of non-normative relationships and ethical issues, inability to form families, unemployment, alienation from family, theft, and increased suicide rates among rural youth.

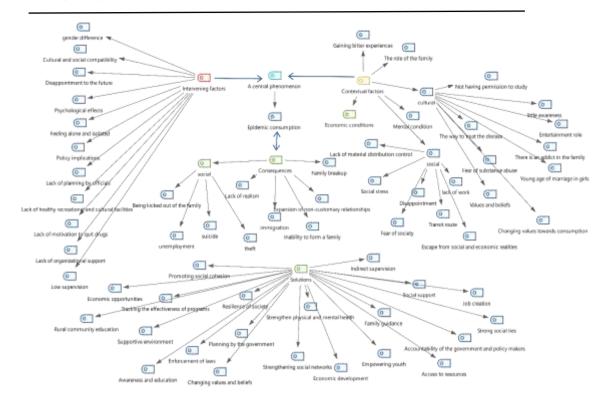


Diagram 5. Paradigmatic Model for Substance Abuse Prevention in Villages

#### 5. Conclusion

Social research is designed to address social issues, serving as a guide that defines the topic, scope, and methodology of the study. This research focuses on substance abuse prevention among rural youth in Iran, which is a complex social issue with psychological, sociological, legal, and political dimensions. Addiction to substances is a significant social issue that can lead to many social harms and deviations, reflecting a bidirectional relationship between addiction and social issues.

In rural areas, youth face unique challenges and vulnerabilities compared to their urban counterparts. Limited access to education, job opportunities, and recreational facilities, combined with social isolation and lack of supportive services, can increase the risk of substance abuse among rural youth. Substance abuse has severe consequences for the physical, psychological, and emotional health of young individuals, disrupting cognitive functions and academic performance, and increasing engagement in risky behaviors and mental health

issues such as depression and anxiety. Furthermore, substance abuse among youth can have widespread social and economic impacts on rural communities, leading to family breakdowns, social alienation, and increased crime rates, ultimately weakening the social fabric and economic vitality of villages.

This research presents a comprehensive paradigmatic model for substance abuse prevention, emphasizing the interplay of economic, cultural, and psychological factors in shaping attitudes and behaviors related to substance use. The proposed model includes a range of strategies and interventions addressing individual, family, and community levels. These strategies involve educational campaigns, skill-building programs, and policy initiatives tailored to the specific needs and contexts of rural communities.

In conclusion, the study highlights the urgent need for a multifaceted approach to substance abuse prevention, focusing on empowering youth, fostering supportive environments, enhancing social cohesion, and changing social values. By addressing these multifaceted challenges, policymakers, community leaders, and stakeholders can collaborate to develop effective prevention initiatives that cater to the unique needs of rural communities. Implementing and evaluating this model can lead to promising outcomes in reducing substance abuse and enhancing protective factors among rural youth. However, it is crucial to recognize that prevention is an ongoing process requiring continuous efforts to ensure that young people can grow and thrive in safe and healthy environments. Through collaborative efforts across sectors and communities, we can create a brighter future for our rural youth and ensure they have the best possible chance for a healthy, happy, and fulfilling life.

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