Social health and youth drug addiction (lived experience)

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Abstract

Considering the role and impact of the three components of youth, social health and drug addiction on the development and lack of development of any society, the purpose of this research is to investigate the causes of drug addiction among the youth of Bojnord city who have lived experience and also Examining and impact of addiction and social health on each other. The method of this research was qualitative and grounded theory type. The participants included 33 people (20 men and 13 women) according to the criteria determined from the people who were between 18-35 years old and were present in the residence and addiction treatment centers of Bojnord city, selected by non-probability (targeted) sampling method and by conducting in-depth and semi-structured interviews, data has been obtained.

The results showed that 5 main categories and 22 sub-categories include individual, family, social, cultural and economic factors as influencing factors on youth addiction, which 1- Individual factors include: pleasure-seeking, curiosity, illusion of increasing power, lack of awareness of the effects of drugs, Getting rid of physical and mental pains, achieving fleeting peace and escaping from problems, lack of life skills 2- Family factors include: unhealthy family, breakdown and divorce, family problems and tensions, lack of supervision in the family, low social capital in the family and emotional indifference 3 - Social factors include: circle of friends, place of living, socializing with drug addicts and negative social capital, reduction of social interactions 4- Cultural factors include: normality of consumption, low cultural capital and lack of free time, low religiosity 5- Economic factors include: poverty And homelessness, child labor, fatigue and long working hours were identified as factors affecting addiction among young people, then it was matched with 33 indicators of

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social health in Iran, and it was found that 24 indicators of social health somehow affect the causes of addiction. as well as addiction, which itself is one of the health indicators It is collective and affects the health of the society, and finally, according to the discovered strategies and consequences, a theoretical model was presented. According to the identification of factors affecting addiction, it can be concluded that by planning and implementing prevention programs, it is possible to reduce this harm, that reducing addiction in any society improves the health of the society and on the other hand, improves the quality of health indicators. Socially, it leads to the reduction of the prevalence of addiction among the youth of the society.

Keywords: social health, drugs, young people, lived experience

1. Introduction

Health is a multi-dimensional concept and every society has a definition of public health depending on the situation and conditions and counts special indicators for a healthy society (Vameghi, 2009). The concept of social health is intuitively less familiar than physical or mental health, but along with physical and mental health, it forms one of the three pillars of most definitions of health. This is partly because social health can refer both to the characteristics of a society and to individuals (Thurber, 2017). "A healthy society is when there is equal opportunity for all and access to goods and services necessary for full functioning as a citizen" (Russell, 2018).

Official attention to social health was stimulated in 1947 by its inclusion in the definition of global health by the World Health Organization and by emphasizing the treatment of patients as social beings living in a complex social context (Cockerham, 2017). Community health has also been linked to growing evidence that people who are well integrated into their communities live longer and recover from illness faster. Conversely, social isolation has been shown to be a risk factor for disease. Therefore, social health may be defined in the form of social adaptation and social support or the ability to play normal roles in society. It is addiction and increased tendency to it (Halgin, 2020). Addiction is a complex and challenging situation in which many factors are involved (Bremness, 2014). Drug abuse is a serious problem that negatively affects the health of users and can have irreversible consequences (Bryan,

2018). Addiction is a disease that affects a person psychologically, physically, socially and economically, which is caused by the use of drugs and stimulants that lead to psychological dependence on the person and then on the person's body and appearance and as a result on the person's relationships and social and economic situations. Addict leaves adverse effects (Sotoudeh, 2021). Clinical findings show that personality traits, lifestyle, social relationships, attitudes, beliefs, feelings, attachments, emotions and generally behaviors that have been formed during a person's growth play a fundamental role in the formation of drug addiction. They do (Stone, 2012). It is clear that the physical and social environments are powerful determinants for adopting and continuing addictive behaviors (Vlahov, 2017). The use of drugs and stimulants in any society has many negative effects, but the most important negative effect is the threat to the future of young people. Today, the issue of addiction is considered as one of the most important problems of the present age, which extends beyond the scope of health and treatment. And it has become a psychological, social and family problem. Drug addiction is a multi-dimensional phenomenon: socio-cultural and economic factors are among the effective factors in the spread of this phenomenon. Unfortunately, the effect of social factors has not received much attention from medical centers (Sekhavat, 2016).

Drug use disorder is increasing more than ever and has negative consequences for any society, the most important negative impact of which is the threat to the future of young people. Therefore, considering the complexity and multi-dimensionality of the problem of addiction and the importance of the health of the society and the youth, this research seeks to answer the questions of what are the factors of addiction among the youth of Bojnord city by using the lived experience of the youth with drug use disorder? Is there a correlation between social health indicators and drug addiction? Can the improvement of social health indicators provide conditions to control and prevent the tendency of young people to become addicted?

2.Review of Literature

In addition to affecting the cultural structure of any society, addiction leaves negative effects on social behavior and the health of society, and the

dependence of one family member on addiction causes the functional weakness of the entire family system. Thus, it is important to pay attention to the role of preventive forces (Zaraki, 2019).

What is certain is that among the wide and complex dimensions of addiction prevention, control and treatment, the category of treatment has a special place and importance in terms of its close relationship with the health system of the society in physical, mental, social dimensions, etc.; Because the use of drugs leads to physical consequences, psychological dependencies, intellectual, social, and economic disturbances and disturbances for the users, and in general, their physical, mental, intellectual, social, and economic health and... risks Based on this, it is possible to reflect more on the relationship between theories and social variables and health. So far, extensive and countless researches have been conducted in different countries regarding the relationship between social components and health, including physical and mental health. For example, in the field of sociology, the theory of social resources, the theory of social networks, the theory of communicative action, and the theory of social solidarity were among the theories that explained the interrelationship between health indicators and social variables (Nasseri, 2018).

Social health is a subject that has not been directly analyzed and explained by sociological perspectives. In other words, some of these views have directly made social health the focus of their theoretical analysis (such as the views of Keyes and Amarthiasen), but some of these theories and views (such as the views of Durkheim and Merton) indirectly discuss abnormalities and deviations. have analyzed the implicit analysis of social health. Keyes in the theory of social health, Amarthiasen in his discussion about social networks, Giddens in the theory of social trust and Wells in the theory of social support have directly analyzed and explained social health. But the indirect analysis of social health can be found in Durkheim's and Merton's anomie theories and Marx's contradiction theory.

Keyes is one of the leading sociologists in the conceptualization and measurement of social health at the micro level. According to him, a person with social health is one who considers society as a meaningful and potentially useful group for growth and prosperity and feels that he belongs to society,

from The side of society is accepted and contributes to its progress. Amartiasen emphasizes on social networks in health analysis. In his opinion, the existence of social networks and collective action can be the basis for the growth of the ability of social actors to control and monitor health determinants in a society.

Durkheim's indirect view of social health is rooted in his theory of anomie. Anomie literally means the absence of law, norm and order or abnormality and disorder. According to Durkheim's view, social health is realized when there is no anomic situation in the society. In a situation where the members of the society feel abnormal and think that they are apart from the society and lose the feeling of solidarity and social support, they engage in abnormal behavior and the consequence is a threat to the social health of the society.

Robert Merton's view on social health is indirectly rooted in his theory of anomie. According to Merton, anomie does not only mean the absence of norms, but also includes the ambiguity and conflict of norms.

Marx considers the society to be the field of contradictions and class struggles and emphasizes on unfairness in the distribution of opportunities. Marx considers the society system and its ruling values not just values, but values of the ruling class to achieve their goals.

Several factors play a role in motivating drug use: no single factor or variable can answer the question of why some people use drugs and others do not. Based on the obtained results, the main theories about drug use can be divided into three categories: biological, psychological and sociological. Biological theories are based on the inherent differences between people who turn to drugs and those who do not., is. Psychological theories focus on one of these three factors, positive or negative reinforcement, and two personality theories, i.e. personality disordered and prone to behavioral problems. Sociologists consider personality traits as defining values of social circles and see their origin in the subcultural group. In fact, most sociological theories are related to the issue of drug use and abuse, such as anomie theory, social control theory and self-control theory. learning and subculture, the theory of selective social interaction / communication and the theory of conflict that the causes of addiction can generally be categorized into the theories of social learning, social control and social pressure.

3. Methodology

The current research is taken from the doctoral thesis of the first author at Islamic Azad University, Azadshahr branch, which has the code of ethics with ID IR.IAU.BOJNOURD.REC.1401.001 from the Ethics Committee of Islamic Azad University, Bojnourd branch.

The topic and nature of this research is of the type and seeks to understand the causes and factors that create the problem, and on the other hand, the lived experiences of drug users are examined in a specific context and context; Therefore, the current research is qualitative and grounded theory type.

The population of this research was women and men addicted to drugs who were present in residential addiction treatment centers of Article 16 (mandatory center) and Article 15 (self-referral or optional centers) of Bojnord city.

The participants in the research include 33 people (20 men and 13 women) whose criteria for selecting participants for the research: being in the age group of 18-35 years, having a suitable physical and mental condition, the ability to answer questions, willingness to cooperate and experience It is high that the reason for choosing the camps was the people's lived experience. Due to the fact that the number of male consumers is more than female, men have a larger sample size compared to women. The demographic characteristics of the participants include age, gender, marital status, number of children, place of residence, type of addiction, individual's education, parents' education, age at which drug use started, how they were introduced to drugs, type of drug used for the first time, number of years' consumption and the number of times of quitting.

Considering that the research method is of the grounded theory type, a non-probability sampling method of the purposeful type was used and the sample size of the research continued until we reached theoretical saturation with 33 interviews and no difference was felt in the answers anymore. did not help to complete the information.

In this research, data collection was done through in-depth and semi-structured interviews. The participants were asked to state everything that had an effect on their dependence on substance use disorder. For data analysis, the grand theory method was used based on Strauss and Corbin's instructions, and

the data was analyzed in three stages through open coding, central coding, and selective coding after the first interview. The first step in grounded theory is open coding. In open coding, crushing, comparing, conceptualizing and categorizing the data is done. Open coding is a part of the analysis that specifically deals with the naming and categorization of phenomena through a detailed examination of the data. Then the coding stage at this stage, the relationship between discovered categories was established, and in the last stage, which is selective coding, the main category or phenomenon of choice and other categories are related to the main phenomenon based on the theory of context. In the grand theory method, the process of going back and forth between the data and their analysis is done, and this process of going back and forth continues until theoretical saturation. Also, before coding the written interviews, they were sent back to the interviewee to review and review them and to confirm the concepts regarding their accuracy. Finally, the coding's were formed in the form of a complex paradigm of background conditions, causal conditions, mediating conditions, strategy and consequence around the central category.

In order to evaluate the research and in order to verify the credibility of the research, four evaluation criteria including believability, transferability, reliability and verifiability were used, which methods of quality assurance, review of participants means frequent reference to participants, use of expert psychologists, The counselors and psychologists stationed in the camps of the research community are experts in the field of addiction in the secretariat of the Anti-Narcotics Coordinating Council and the General Directorate of Welfare and Previous Research.

4. Findings

This study was conducted with the participation of 33 people with drug abuse residing in residential and treatment centers (camps) in Bojnord. The descriptive information of the participants is presented in the table below.

Table 1. Descriptive information of the participants

case	gender	Age	education	Number of children	Marital status	Age of start of use	the method of introduction	duration of use
1	woman	35	guidance	3	married	25	Spouse	10
2	woman	35	elementary	3	widow	25	Spouse	10
3	woman	33	elementary	2	married	a baby	parents	33
4	woman	35	guidance	2	married	29	Friend	6
5	woman	26	diploma	1	married	22	relatives	4
6	woman	31	diploma	1	married	19	Friend	12
7	woman	35	illiterate	2	divorced	a baby	Family	35
8	woman	27	Master's degree	0	married	a baby	Family	27
9	woman	26	elementary	1	married	24	Family	2
10	woman	32	Bachelor's degree	0	divorced	22	Friend	10
11	woman	35	illiterate	4	married	15	Spouse	20
12	woman	32	diploma	0	divorced	23	relatives	9
13	woman	35	illiterate	5	married	13	relatives	22
14	Man	32	guidance	-	Single	17	Friend	15
15	Man	35	elementary	0	divorced	19	Friend	16
16	Man	33	elementary	-	Single	26	Friend	15
17	Man	34	guidance	0	divorced	19	Friend	15
18	Man	28	guidance	1	married	22	Friend	6
19	Man	23	illiterate	-	Single	14	Friend	9
20	Man	20	elementary	-	Single	19	Friend	1
21	Man	25	diploma	-	Single	17	Friend	8
22	Man	35	elementary	0	married	13	Friend	22
23	Man	30	Bachelor's degree	0	divorced	16	Friend	14
24	Man	32	diploma	2	married	18	Friend	14
25	Man	26	guidance	0	married	10	Friend	16
26	Man	20	guidance	-	Single	13	Friend	7
27	Man	21	guidance	-	Single	15	relatives	6
28	Man	32	Associate Degree	2	married	22	Friend	
29	Man	35	diploma	2	married	26	Friend	9
30	Man	35	illiterate	1	divorced	22	Friend	13
31	Man	34	guidance	-	Single	18	Friend	16
32	Man	31	guidance	1	married	20	Friend	11
33	Man	35	guidance	-	Single	17	Friend	18

13 participants are women and 20 are men. 8 of the respondents are between the ages of 18 and 26 and 25 of them are in the age range of 27-35 years. In

terms of marital status, 9 of the participants are single, ٧ are divorced, 2 are single due to death or spouseless due to concubinage and separation, and 15 are married. Among married people, whose number is 24; 10 people without children, other participants have 1 to 5 children, of which 6 people have one child, 8 people have two children, one person has 4 children and one person has 5 children. Regarding the place of residence, most of the participants have stated that they live in North Khorasan and the city of Bojnord (outskirts), and only 2 people live in the northern cities of the country and 2 people live in Tehran. In terms of educational status, most of the respondents have middle school to high school education. Regarding the education level of the parents, most of the participants have illiterate parents. In terms of the number of years of consumption, 12 of the respondents have consumed between 6-10 years, 8 between 11-15 years, ٥ between 16-20 years, ٣ between 1-5 years, 2 between 21-25 years, 2 between 31-35 years and 1 person between 26-30 years of use. The way of getting to know about drugs also shows that 22 of the respondents stated that they got acquainted with drugs through friends. Age at which 11 respondents started using drugs at the age of 16-20. 9 people aged 21-25 years, 7 people aged 10-15 years, 3 people aged 0-5 years and 3 people aged 26-30 years have started using drugs. 3 of the respondents have stated that they used drugs in their childhood and they experienced drug use in some way from infancy and through the family. Among them, only 2 people have a history of drug use between 1 and 2 years. 10 of the participants stated that the number of drug withdrawals was only once.In this research, based on the guidelines of Strauss and Corbin, the analysis was done with open, axial and selective coding (13) and by examining all the interviews with the open coding method by breaking and labeling the categories, it was discovered that due to the overlap of some categories Deleted.

The categories related to causal conditions were classified into ٥ main categories or themes (individual factors, family factors, social factors, economic factors, cultural factors). Then, based on the axial coding, the relationship between the categories was established and it was compiled in the form of a model containing ٥ parts (causal conditions, contextual conditions, intervening conditions, strategies and consequences). Causal conditions refer to

incidents, events and occurrences that lead to the occurrence or development of a phenomenon; Background conditions refer to the conditions that occur during or after the action of the phenomenon. Intervening conditions are conditions that facilitate or limit strategies. Considering that the intervening conditions affect different people differently; Therefore, their extraction has not been done in the category format and after analysis it is presented in the theoretical model. Strategies are solutions in response to the phenomenon that people choose, and finally the consequences that refer to the results of actions. Then, based on selective coding, the specific main phenomenon and other categories were related and a theoretical model was presented. The analysis of this research was done based on the instructions of Strauss and Corbin (1998), including open, axial and selective coding, and the components of the theoretical model are listed in Table 2.

Table 2. Theoretical model components based on Strauss and Corbin guidelines

Selective encodi	Axial coding		Open coding
underlying factors	Causal or antecedent conditions	Individual factors	Curiosity
			Pleasure
			Illusion of empowerment
			Lack of knowledge
			Relief from physical and mental pain
			Achieving temporary peace and escaping problems
		Family factors	unhealthy family
			Breakup and divorce
			Family problems and tensions
		cultural factors	Lack of supervision in the family
			Low social capital in the family and emotional apathy
			Normal consumption
			Low cultural capital and lack of free time
			low religiosity
Perpetuating and aggravating factors		social factors	Nabob's circle of friends
			Place of consumption
			Associating with addicts and negative social capital
			Decreased social interactions
		Economic factors	Poverty and homelessness
			child labor
			Work fatigue and long working hours
	Background	The lived	field of action

	conditions	experience of young people	Effects of drug use
	Strategies	Action to leave the material	- Attempt to quit at home - Attempt to quit through clinics - Attempt to quit through camps - Attempt to quit through -Narcotics Anonymous
		Failure to leave materials	-Attempt to quit through prayer -Surrender to consumption - Forced leaving by the government
	Consequences	Permanently successful quit	Promotion of social health
		Leave failed	Decreased social health

In this part, where the social health indicators affecting addiction should be analyzed, the most important issue is the newness of the concept of social health, which has not yet reached a complete and universal consensus on its components, dimensions, axes, and indicators. The World Health Organization defines the concept of social health as the evaluation of a person's performance in front of society. A person's social health is more important and sensitive than the physical and mental aspects of a person's health, because factors that endanger a person's physical health have limited effects and consequences, but factors that threaten a person's social health continuously affect His relationships with others affect and always disturb more than one person (Hashemi Isfahani, 2011) in various researches, dimensions and indicators of social health in the world and Iran have been discussed, the most important of which is Keyes's theory that social health has 5 dimensions.

Social prosperity - social cohesion - social parenting - social cooperation and social adaptation and 33 items. Mohammad Tavakol in a research on social health: dimensions, axes and indicators in global and Iranian studies, in order to avoid interference and repetition, a comprehensive and classified list of dimensions and indicators in 7 dimensions: 1- Livelihood - Economic 2 - Social 3- Social harms 4- Health 5- Demographic 6- Education 7- Environment and 33 final indicators (Tavakol, 2015). which were used for analysis due to the comprehensiveness of these indicators, so after checking and matching 33 identified causes Addiction with 33 social health indicators, 24 social health

indicators have a direct effect on addiction. This is one of the effective indicators on the health of drug use, which shows the direct relationship between addiction and social health, which is presented in the table below.

**Table 3. Social health indicators affecting drug addiction**

Social Health Indices Affecting Drug Addiction	
Livelihood-Economic	- Access to adequate housing and water (marginalization) - Economic development, lack of poverty and per capita income - Reducing unemployment and favorable employment conditions - Supportive work environment for individuals and families
social	- Peace, security or sense of security - Proper distribution of income and social justice - Existence of adequate communication and support networks - Development of social skills and life skills - Social participation - Observance of social ethics - Existence of adequate and appropriate recreational facilities
Social harm	- Low substance abuse - Control of alcoholism and its consequences - Reduction of child abuse and child abuse - Reduction of crime and delinquency - Reduction of violence in social behaviors and relationships - Reduction of divorce
Health	Access to health services and comprehensive insurance coverage
Collective	Reduce pregnancy and childbirth rates of adolescent or illiterate mothers
Educational	- Public education - Reducing dropout rates or not enrolling in school - Number of high school graduates - Development of knowledge and human resources
The environment	Clean and safe environment

herefore, after matching the causes of addiction with social health indicators, the following theoretical model can be presented based on the grounded theory method.

Based on the findings from the interviews and the direct relationship between the causes of addiction and social health indicators, suggested solutions are presented to improve social health indicators that can prevent addiction.

- Creation of job opportunities equal to income suitable for living expenses and job security

- Fair distribution of urban services in all areas with a special focus on marginal areas

-Creating social health centers with a focus on counseling and interventions in the field of social harms and easy access to these centers

- Planning in line with the active participation of government agencies and people

- Creating communication and support networks or strengthening existing support institutions

- Teaching life skills in training centers

-Creating sufficient and suitable entertainment platforms in a fair manner

- Combating the supply of drugs with new methods for the entry of drugs into the country

- Serious confrontation by the judicial system and the adoption of deterrent laws against criminals

- Easy and free access of people to healthcare services

-Creating a platform for free education for everyone and preventing dropouts at least up to the diploma level

-Monitoring the performance of devices by monitoring devices

- Informing about the recognition and status of social health by radio and television
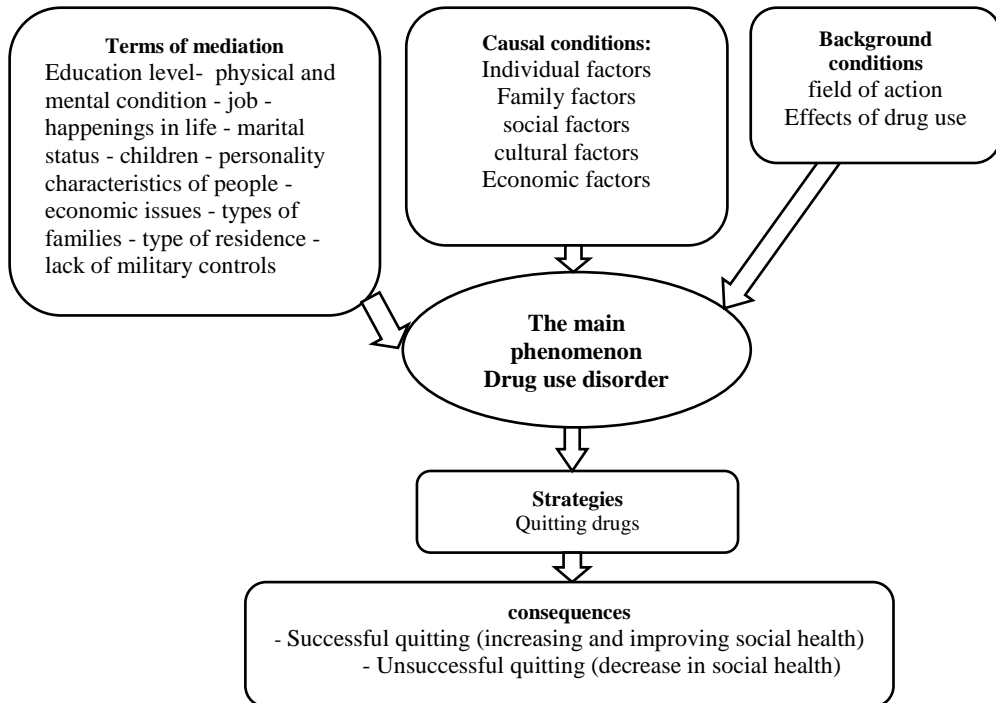
Figure 1. Theoretical model of the lived experience of young people

In order to implement the suggested items, it is necessary to cooperate with all the relevant institutions, create a sense of responsibility among the officials,

define a single and comprehensive social health, prevent financial dispersion in different institutions and the participation of the people.

5. Conclusion

This research aims to investigate the causes of addiction and its impact on society's health and society's health on addiction based on the lived experience of drug-addicted youth in Bojnord city with a grounded theory approach. The results of the interviews showed that the causes of addiction were found in 5 main categories including social factors, cultural factors, family factors, economic factors and individual factors and 22 subcategories. After examining and matching the causes of addiction with the index social health indicators which are compiled in 7 dimensions, it was found that 24 social health indicators are somehow common with the causes of addiction, and 17 of these indicators are related to social and economic dimensions, therefore, while improving the quality and quantity of all health indicators Socially in the society, we must take a special look at the social and economic indicators to prevent the spread of drug addiction in the society.

The results of the research of Hajli, Zakariai and Hojjati Kermani showed that the cause of drug use in people was polluted living place, unemployment, divorce and separation, poor upbringing and education, ignorance, lack of recreational facilities (Hajli, Zakariai and Hojjati Kermani 2010).

The results of the research of Khmernia and Tadhan showed that the economic causes of the tendency to use drugs include poverty and homelessness, work fatigue and long hours are the most important causes (Khamernia, 2018). The results of the time studies by Sadat Hosseini and Rezaei showed that factors such as the environment, family conditions, financial problems, pressure from the group of friends, the spread of unemployment, easy access to drugs, and physical diseases, with the tendency of young people and students to become addicted. It is related (Zamani, 2017). The results of the research of Tosafian, Qadri Bege Jan, Khaledian and Farrokhi showed that family functioning and its components, including problem solving and communication skills, play a role in drug addiction (Tosifian, 2018). In a research conducted by Yahya Zadeh was conducted on

the topic of the effect of family factors on the tendency to abuse drugs, the results showed that the welfare status of families and also family relationships were not good. Adolescents have started using drugs (for example: Orang, 1982; Pandina and Escuel, 1983; Aghabakshi, 2009; Piran, 1986; Brock, Gordon, Whitman and Cohen, 1990; Sadri, 1999; Dembo, 1987; Crandall, 1993; Clement, Aragon and Plotchick et al., 1989; Keller, Yonell and Eldgett, 1999; Patterson et al., 1992) and D. In the research of Smart, Adlaf, and Walsh, the low social status and the poor economic status of the families are very influential on the tendency to use drugs (YahyaZadeh, 2012). The results of Mousavi's research also showed a direct effect and a significant relationship between life skills training with the aim of prevention, with the change in the scores of trained people, which in a short time life skills training workshop with the aim of changing mediating variables such as self-awareness, etc. decreased to 75/ narcotics use (Mousavi, 2010).

According to Marx's class theory, committing a crime is a function of economic conditions, which in this research, based on social health indicators and addiction factors, issues such as unemployment, poverty, lack of housing, etc. lead to a decrease in health and an increase in addiction, or based on the addiction conflict theory It has a lot to do with social class, income, power and place of residence.

According to the theory of deprivation, when people fail to reach the facilities, they are diverted. In this research, based on social health indicators, lack of access to free education, health services, recreational facilities and lack of access to housing are effective on health. Cases were also identified as the causes of addiction

Drug abuse among the youth of Bojnord city has important consequences in two personal dimensions, including vulnerability, shame and isolation in women and suicide attempts, hallucinations in men, and in the social dimension, the consequences of divorce and family problems for most women, and for men, expulsion from It leads to work and reduction of family function, which leads to reduction of social health.

This study showed that fortunately, addressing the important issue of social health has been increasing in the last one or two decades, but it also showed

that the focus of more studies on human resources and then on the components of economic and social development, i.e. poverty and income, unemployment and employment, and social justice, and less attention has been paid to important issues such as suicide, violence, insurance, as well as health, environmental degradation, and population growth. Therefore, it is necessary that both scientific circles and executive circles provide arrangements to deal more with these issues.

Considering that drug addiction is one of the indicators of society's health, therefore, reducing the prevalence of addiction has a direct effect on increasing society's health, and also studies show that according to the relationship between the indicators of society's health and the causes of addiction, an increase The level of social health indicators has a direct effect on the reduction of addiction, therefore, according to the discovery of factors affecting the addiction of young people, the institutions responsible for the implementation of prevention programs with the participation of all, in order to increase the health of society by reducing addiction among young people, and also Detailed planning in order to improve social health indicators, especially by focusing and prioritizing social and economic indicators, in addition to improving community health, will lead to a reduction in addiction among young people.

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