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Determining the Effective Factors in Women's Tendency to Drugs and Psychotropic Substances

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Abstract

Background: *Addiction is one of the most critical problems that has reached a global scale, and has gone beyond the borders of health care, and has become a psychological, social, and family problem. Therefore, the present study aimed to investigate the causes of women's tendency to drugs and psychotropic substances in Gorgan.*

Methods: *The research method is cross-sectional and descriptive. The statistical population included all women who came to addiction treatment clinics in Gorgan in 2019. The sampling method was available, and the sample size was 60 people. A questionnaire on the causes of women's addiction to drugs was used to collect data. Data were analyzed for their univariate nature using descriptive statistics (Frequency, percentage, central indicators, and dispersion).*

Results: *The results of data analysis showed that among the seven factors studied in the causes of women's tendency to drugs and psychosis, the important factors are psychological, cultural, economic, social, physical, religious, and geographical, respectively. Addiction is a complex and polyhedral disease. And in this study, the psychological factor was one of the most important factors in women's tendency to drugs and psychotropic substances.*

Conclusions: *Therefore, it seems that understanding the underlying factors causes the process of prevention, identification, treatment, and follow-up to be purposefully planned.*

Keywords: Addiction, Psychotropic, Substances, Women.
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Introduction

The phenomenon of drug use and dependence has become one of the major problems in the world. After the nuclear crisis, population explosion, and environmental pollution, it is the fourth most critical issue with which experts have been concerned.[1]According to estimates of the United Nations office on drugs and crime, 3.4 percent of the world's population, or 4.7 percent of the world's population over the age of 15 are addicted to drug abuse.[2] Drug addiction occurs in any country, whether developed or developing, and because of its consequences, it is included in the category of social harm, which itself is the cause of many other harms.[3] Women are the first and most victims of many social harms and deviations. Addiction is not the first, but one of the most important of these harms. Experts believe that addicted women are much more vulnerable than addicted men; because drug use in women is associated with other social harms such as running away from home, begging, prostitution, and poverty.[4] Some studies on populations limited to women acknowledge that the conventional patterns of addiction are changing. Social factors, biological responses, dependency growth, medical consequences, and psychiatric disorders have posed challenges to addiction for men and women.[5]

Three categories of factors including family factors, psychological factors, and external factors play a major role in women's addiction.[6] Some studies have shown that the four factors of feelings of inferiority and worthlessness, feelings of physical and psychological harm, fear of deterioration of the physical condition and premature death, and feelings of superiority and power are influential in women's addiction.[7] In addition, family conditions are one of the most important factors in women's addiction to drugs and psychotropic substances. Processes related to family turmoil, parenting styles, the existence of an addicted family member, disputes and divorce, spouse addiction, spousal abuse, dysfunctional relationship, apathy and disgust toward a spouse, and lack of spouse support are among the most common family factors contributing to women's addiction.[8,9] Individual and psychological factors such as psychological problems, weakness of will, the tendency to and readiness for addiction and poor life skills are among the other influential factors in women's tendency to addiction.[10-12] For example, Khairi, Rahman, and Muthiah in their study demonstrated that the risk of drug abuse is higher among young people and those with low levels of education, low self-esteem, and a history of drinking alcohol and smoking.[13] Moreover, the results of the study of Banafsheh et al which examined the use pattern and causes of addiction tendency in women undergoing maintenance therapy, showed that the main causes of drug addiction from the perspective of patients were addicted family (77%), easy access to drugs (64%) and depression (56%).[14] Moreover, personality traits such as hypersensitivity, neuroticism, perfectionism, ineffective coping styles including emotional and avoidant styles, psychological conflicts including the conflict in goals, gender role conflict, self-conflict, negative experiences, violence, emotional failure, and individual motivations are significantly influential in women's addition.[15] In the pathology of drug addiction, the pattern of insecure attachment,[16] opioids are used to reduce the pain of chronic non-cancer patients.[17] Biological, social, and environmental factors are known to be important in women's drug abuse.[18,19] And finally, Amiri, Taheri, Hosseini, Mohsenpour, and Davidson in their findings, pointed to a number of factors influential in women's addiction, including A) Environmental factors (friendly communities,

communication with drug users), B) Family factors (drug users in the family, loneliness, separation from family, family problems and disputes), C) Individual factors (Attraction of the opposite sex, wealth, being an athlete, curiosity, receiving energy, youth ignorance, illness), and D) Social factors (having a hard job, unemployment, lack of recreation, and easy access to drugs).[20] Today, the causes of women's tendency to drugs and psychotropic substances are among the serious concerns of various societies, including our country. Although the number of addicted women in Iranian society is much lower than men, it should be noted that women are more vulnerable in this area. Undoubtedly, the entanglement of the problem of addiction with other harms will cause more destruction for addicted women and make it more difficult for them to return to a healthy life. Drug addiction is a social harm whose devastation causes the collapse of many cultural and moral values and norms. Golestan is one of the provinces in the country where the prevalence and use of drugs by women are expanding. The questions of why the catastrophe of addiction, with such extent and depth, has become so pervasive in society, why women have become so addicted to it, and where the root of this social problem lies, are the questions of many researchers and scholars in the field of addiction. Therefore, it seems that the study of the causes of women's addiction in Gorgan can play a significant role in preventing and reducing drug addiction among women in this region; because reaching a more accurate picture of the conditions and contexts of its prevalence clarifies the causes and mechanisms of durability and stability of this phenomenon. Therefore, this study was conducted to investigate the causes of the tendency to drug and psychotropic substances in women referring to addiction treatment clinics in Gorgan.

Materials and Methods

The research method is cross-sectional, of the descriptive type. The statistical population includes all addicted women who were referred to addiction treatment clinics in Gorgan in 2018. The sampling method was convenience sampling, and the sample included 60 people from three addiction treatment centers. A questionnaire on the causes of drug addiction in women was used to collect data (Rimaz, 2013). In order to comply with the ethical considerations and the condition of entry, the necessary coordination was made with the officials of the addiction treatment centers and the participants in the research. The participants were assured of the confidentiality of the data. The condition for the participants to leave the study was having other physical and mental illnesses or incomplete or incorrect completion of the questionnaire. Data were analyzed using descriptive statistics (frequency, percentage, central and dispersion tendencies) by SPSS-23 software.

Causes of women's drug addiction: The questionnaire pertained to the causes of women's drug addiction, which was developed by Rimaz (2013). This questionnaire consists of 50 items and 7 subscales of social factor (20 items), cultural factor (8 items), economic factor (5 items), psychological factor (7 items), physical factor (4 items), geographical factor (2 items), and religious factor (4 items) measuring the factors affecting women's addiction. The questionnaire is scored in the format of a 4-point Likert scale, which is considered 1, 2, 3, and 4, respectively, for the "very low", "low", "high" and "very high" options. To calculate the total score of the questionnaire, the scores of all items are added together. The minimum score in this questionnaire is 50, and the maximum score is 200. Obviously, the higher the score obtained, the higher the rate of women's drug addiction in the statistical population. To approve the validity of the questionnaire, content validity was used. In this regard, the questionnaire prepared by the researcher was given to 7 university professors in this field, and finally, by applying their corrective and supplementary comments, the final version of the questionnaire was prepared. To approve the reliability of the questionnaire, the test-retest method was used. In this way, the questionnaire was given twice and with an interval of 14 days to 10 people, who were eligible to enter the study in each of the groups. Then, the obtained answers were examined twice for each of the items in terms of continuity and consistency. The correlation coefficient was 0.77 for the study group and 0.83 for the control group. To determine the internal consistency of the questionnaire, the method of calculating the interbranch correlation coefficient was used, which revealed a confidence interval of 0.95 in the range of 0.94 - 0.7021. In this study, in the preliminary stage of examination, the validity of this test was estimated to be 0.89 and its validity to be 0.78.

Results

The descriptive findings related to the study of the causes of women's tendency to drugs and psychotropic substances in Gorgan (frequency, percentage, and central and dispersion tendencies) are as follows. Descriptive data obtained in relation to the social factors (family dysfunctionality, illiteracy or partial literacy of the family, illiteracy or partial literacy of women, addiction of the husband, addiction of the parents, the marriage of girls at an early age, divorce, remarriage of the husband, having a large age difference with the husband, encouraging addicted spouses to use drugs, forced marriage, lack of mass communication tools, husband remarriage, death of a loved one, living with stepfather and stepmother, having constant contact with other addicted people in one's area, using substances to calm children, girl's providing necessary items for drug use of parents, widespread availability, doing men-related work as a result of extreme fatigue), showed that husband's addiction was one of the most important factors and availability was one of the least important factors in the causes of women's tendency to use drugs and psychotropic substances. Moreover, descriptive data obtained from the items related to the cultural factors (use of substances in leisure time and for entertainment, lack of recreational facilities, pride and keeping up with the Joneses, lack of sense of responsibility, lack of awareness of social, physical and psychological consequences of drug use, the disappearance of the indecency of addiction among villagers, parents' paying attention to boys and ignoring girls, paying attention to the immediate effects of drugs at early stages of drug use), showed that lack of sense of responsibility is the most important factor and the disappearance of the decency of addiction among the villagers is one of the least important factors in the causes of women's tendency to drugs and psychotropic substances. Descriptive data obtained in relation to economic factors (economic poverty, lack of work to do during long winter nights, supply and sale of drugs by women, drug use by others in low-income families, availability of medical facilities), showed that the

factor of economic poverty is one of the most important factors and the availability of medical facilities is one of the least important factors in the causes of women's tendency to use drugs and psychotropic substances. Descriptive data obtained in relation to psychological factors (having a feeling that a person has completely failed, women's not being sexually satisfied by older husbands, women's being sexually dissatisfied by addicted husbands, having the feeling that they are not as happy as others, having feelings of anxiety and worry, emotional failure, and sexual problems), showed that having feelings of anxiety and worry is the most important factor and women's sexual dissatisfaction by older husbands is one of the least important factors in the causes of women's tendency to use drugs and psychotropic substances. Descriptive data obtained in relation to physical factors (having a physical defect, incurable and chronic disease, use of substances as analgesics in postpartum recovery, self-medication for diseases), showed that the use of drugs as analgesics during postpartum recovery is one of the most important factors and incurable and chronic disease is one of the least important factors in the causes of women's tendency to use drugs and psychotropic substances. Descriptive data obtained in relation to the characteristics of geographical factors (cold weather, mountainous areas being impassable), showed that mountainous areas being impassable is the most important factor and cold weather is the least important factor in the causes of women's tendency to use drugs and psychotropic substances. Descriptive data obtained in relation to the items of religious factors (loss of moral values, weak ideological foundations, non-importance of prayer, non-importance of the Qur'an) showed that the loss of moral values is one of the most important factors and the lack of importance of prayer is one of the least important factors in women's tendency to use the drug and psychotropic substances.

As the data (table 1) show, among the social factors, the husband's addiction has been one of the most important factors and availability has been one of the least important factors in the causes of women's tendency to use drugs and psychotropic substances.

As the data (table 2) show, among the cultural factors, lack of responsibility is the most important factor and the disappearance of the decency of addiction among the villagers has been the least important factor in the causes of women's tendency to use drugs and psychotropic substances. Moreover, among the economic factors, economic poverty is one of the most important factors and the availability of medical facilities is one of the least important factors in the causes of women's tendency to use drugs and psychotropic substances.

Table 1. Descriptive data of social factors of tendency to use drug and psychotropic substances in the study group

Items	N	Frequency/ Percent Very little	Frequency/Percent Little	Frequency/ Percent Much	Frequency/ Percent Very much
Family disfunctionality	60	18(30)	12(20)	12(20)	8(30)
Illiteracy or partial literacy of family	60	24(40)	12(20)	18(20)	0(0)
Illiteracy or partial literacy of women	60	42(70)	12(20)	6(10)	0(0)
Husband's addiction	60	12(20)	2(20)	6(10)	0(50)
Parents' addition	60	36(60)	6(10)	17(28.33)	7(11.66)
Marriage of girls at an early age	60	15(25)	2(3.33)	25(41.66)	18(30)
Divorce	60	33(55)	0(0)	8(13.33)	19(31.66)
Remarriage of women	60	24(40)	17(28.33)	13(21.66)	6(10)
Having a large age difference with the husband	60	34(56.66)	11(18.33)	10(16.66)	5(8.33)
Encouraging addicted spouses to use drugs	60	26(41.66)	18(30)	9(15)	7(11.66)
Forced marriage	60	30(50)	21(35)	6(10)	3(5)
Lack of mass communication tools	60	39(65)	11(18.33)	5(8.33)	5(8.33)
Remarriage of husband	60	42(70)	11(18.33)	3(5)	4(6.66)
Death of a loved one	60	3(5)	9(15)	35(58.33)	13(21.66)
Living with stepfather and stepmother	60	23(38.33)	21(35)	12(20)	4(6.66)
Having constant contact with other addicted people in one's area	60	30(50)	12(20)	14(23.33)	4(6.66)
Using substances to calm children	60	49(81.66)	11(18.33)	(0)	0(0)
Girls' providing necessary items for drug use of parents	60	39(65)	12(20)	7(11.66)	2(3.33)
Widespread availability	60	44(73.33)	13(21.33)	3(5)	0(0)
Doing men-related work as a result of extreme fatigue	60	36(60)	14(23.33)	9(15)	1(1.66)

As the data (table 3) show, among the psychological factors, having feelings of anxiety and worry is one of the most important factors and lack of sexual satisfaction of women by older husbands is the least important factor; among the physical factors, the use of drugs as analgesics during postpartum recovery is the most important factor and incurable and chronic disease is the least important factor; among the geographical factors, the most important factor is the mountainous area being impassable and the cold weather is the least important factor; among religious factors, the disappearance of moral values is one of the most important factors and the non-importance of prayer is one of the least important factors in the causes of women's tendency to use drugs and psychotropic substances.

As the data (table 4) show, according to the mean scores of the number of items related to each factor, the most important factor in women's tendency to use drugs and psychotropic substances is the psychological factor and the least effective is the geographical factor.

Table 2. Frequency and percentage of social cultural and economic factors of tendency to use drug and psychotropic substances in the study group

Items	N	Frequency/percent Very little	Frequency/percent Little	Frequency/percent Much	Frequency/percent Very much
Use of substances in leisure time and for entertainment	60	24(40)	12(20)	15(25)	9(15)
Lack of recreational facilities	60	28(46.66)	16(26.66)	12(20)	4(6.66)
Pride and keeping up with the joneses	60	32(53.23)	19(31.66	4(6.66)	5(8.23)
Lack of sense of responsibility	60	4(6.66)	9(15)	11(18.23)	26(60)
Lack of awareness of social, physical and psychological consequences of drug use	60	8(8.33)	13(21.66)	16(26.66)	23(28.23)
Disappearance of the indecency of addiction among villagers	60	41(68.22)	7(11.66)	8(13.22)	4(6.66)
Parents' paying attention to boys and ignoring girls	60	12(20)	9(15)	27(45)	13(21.66)
Paying attention to the immediate effects of drugs at early stages of drug use	60	4(6.66)	6(10)	28(46.66)	4(6.66)
Economic poverty	60	0(0)	6(10)	23(38.33)	4(6.66)
Lack of having works to do during long winter nights	60	24(40)	15(25)	15(25)	0(0)
Supply and sale of drugs by women	60	19(31.66)	20(33.33)	18(30)	2(3.33)
Drug use by others in low-income families	60	14(23.33)	11(18.33)	19(31.66)	0(0)
Availability of medical facilities	60	34(56.66)	18(30)	6(10)	1(1.66)

Table 3. Descriptive data of psychological, physical, geographical and religious factors of addiction to use drugs and psychotropic substances in the study group

Items	N	Frequency/ Percent Very little/	Frequency/ Percent Little	Frequency/ Percent Much	Frequency/ Percent Very much
Having a feeling that a person has completely failed	60	5(8.33)	8(13.33)	33(55)	14(23.33)
Women's not being sexually satisfied by older husbands	60	34(56.66)	17(28.33)	8(13.33)	1(1.66)
Women's being sexually dissatisfied by addicted husbands	60	9(15)	11(18.33)	29(48.33)	11(18.33)
Having the feeling that they are not as happy as others	60	0(0)	14(23.33)	31(53.33)	15(25)
Having feelings of anxiety and worry	60	0(0)	7(11.66)	21(35)	32(53.33)
Emotional failure	60	3(5)	24(40)	23(38.33)	10(16.66)
Sexual problems	60	12(20)	18(30)	22(36.66)	8(13.33)
Having a physical defect	60	27(45)	13(21.66)	20(33.33)	0(0)
Incurable and chronic disease	60	42(70)	7(11.66)	9(15)	2(3.33)
Use of substances as analgesics in postpartum recovery	60	0(0)	25(41.66)	31(51.66)	4(6.66)
Self-medication for diseases	60	22(36.66)	13(21.66)	14(23.33)	11(18.33)
Cold weather	60	31(51.66)	17)28.33)	8(13.13)	4(6.66)
Mountainous areas being impassable	60	36(60)	10(16.66)	5(8.33)	9(15)
Loss of moral values	60	7(11.66)	19(31.66)	25(41.66)	9(15)
Weak ideological foundations	60	37(61.66)	16(26.66)	6(10)	1(1.66)
Non-importance of prayer	60	31(51.3)	13(21.66)	12(20)	4(6.66)
Non-importance of the Qur'an	60	27(45)	21(35)	7(11.66)	5(8.33)

Table 4. Central and dispersion tendencies of the sub-scales of the questionnaire of causes of women's tendency to use drugs and psychotropic substance

Factors	Number of items	Mean scores of items	M	SD
Social	20	40	39.08	4.77
Cultural	8	16	19.3	2.52
Economical	5	10	11.8	1.5
Psychological	7	14	18.63	2.61
Physical	4	8	8.28	1.1
Geographical	2	4	3.53	13.58
Religious	4	8	7.76	30.28
Total	50	100	108.38	8.05

Discussion

As the data show, based on the mean scores in proportion to the number of items related to each factor, the psychological factor, cultural factor, economic factor, social factor, physical factor, religious factor, and geographical factor are effective factors in women's tendency to use drugs and psychotropic substances in this study, being in line with findings of Hanpatchaiyakul et al. (2017), Hashemimoghadam et al. (2020), Mirzakhani, Khodadadi Sangdeh, and Nabipour (2020), and Soltani et al. (2020). The tendency to use drugs and psychotropic substances in women stems from various factors. Just as the treatment of a disease requires knowing the cause of the disease, in order to treat addiction in society, one must first know the various causes of it. Investigating the underlying factors causing addiction is necessary in two ways: 1) Identifying individuals in order to introduce the risk of addiction and taking the necessary preventive actions for them, and 2) Choosing the type of treatment, taking services, support, and counseling actions for addicts.[22] Therefore, it is natural that recognizing the causes, prevention, and treatment of this problem is one of the priorities of research in the field of community mental health. In the case of substance abuse, six key areas, including the individual, peers, family, school, neighborhood, and community interact, and the individual is at the heart of this model.[23] In explaining the findings of this study that the psychological factor is one of the most important causes of women's addiction, it can be stated that drug abuse is usually associated with symptoms of psychiatric disorders such as conduct disorder, attention deficit hyperactivity disorder, anxiety disorder, and depression. Addicts also have problems such as self-centeredness, lack of sense of responsibility, rebellion and lack of social development, aggression, the expectation of support, low self-esteem and pessimism, feelings of inadequacy and introversion, more nervousness and less conscience, hedonism, omnipotence illusion, pride, defiance, and confirmation seeking.[24]

Regarding the role of the cultural factor in addiction, some factors can be named such as acculturation and ethnic and religious identity. In some cultures, drug use is part of social and local customs and may be a sign of social recognition and acceptance.[25] Another important factor in women's addiction in this study was the role of the family. The family is a natural and social system to which individuals willingly or unwillingly depend and is the first center in which the individual feels safe and is accepted and supported. Family structure and atmosphere play an important role in the performance and behavior of individuals. Parents are important because the family is the first source of socialization, and parents' beliefs can also reinforce or weaken the messages of the prevention program.[23] Lack of high generalizability pertaining to conducting this research in a specific spatial and temporal area, and lack of control over some variables affecting the research results such as lack of attention to the economic and social class of participants were among the limitations of this study. In line with the findings of this study, some strategies are recommended, such as empowering women at risk to increase life expectancy and coping with problems and enduring psychological distress, educating people about the dangers and harms of drugs, increasing life skills, increasing alternative activities instead of using drugs to meet psychosocial needs, cultural and religious promotion, strengthening anti-drug laws and regulations, treatment of addicts to prevent the spread of addiction, person-centered activities, activities focused on education and awareness, prevention activities using the media, prevention activities through workplaces and recreation areas, prevention activities using health care networks, and law enforcement.

In examining the factors influential in women's tendency to use drugs and psychotropic substances, it was found that individual, social, family, cultural, physical, economic, and religious factors play roles. The most important factors identified by the participants of this study were the individual and psychological factors, referring to a danger that is always lurking as an internal threat. The fact is that women are more emotionally sensitive than men, and they experience more psychological and behavioral disorders in the face of various pressures in life. It was also shown that in the etiology of drug abuse and addiction, various factors are intertwined and interact with each other. This is why addiction is a biological, psychological, and social disease that can easily weaken the foundation of an individual, family, social and cultural life of an individual and society, and can expose them to collapse.

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Conflict of Interest

The authors declare that they have no conflict of interest.

References

1. Kendler KS, Ohlsson H, Edwards AG, Sundquist J, Sundquist K. A developmental etiological model for drug abuse in men. Drug Alcohol Depend 2017;179:220-28. doi:10.1016/j.drugalcdep.2017.06.036
2. Nazemi-Rezaei SV, Nazemi-Rezaei SA. Prediction of tendency to addiction based on alexithymia and assertiveness in nursing students. Feyz 2020;24:228-36.
3. Nateghi M, Sohrabi F. The effectiveness of cognitive-behavioral therapy in suicidal thoughts and impulsivity among adolescents with addiction. Etiadpajohi 2017;11:213-28.

4. HamidianRad M, Zeinali A. The prevalence of drug and alcohol use among students of Urmia universities. Etiadpajohi 2019;12:175-92.

5. Tuchman E. Women and addiction: the importance of gender issues in substance abuse research. J Addict Dis 2010;29:127-38. doi:10.1080/10550881003684582

6. Hashemimoghadam L, Torkan H, Yousefi Z. The qualitative study of protective and risk factors in addiction among men and women in Isfahan city. Etiadpajohi 2020;14:133-50.

7. Hanpatchaiyakul K, Eriksson H, Kijsomporn J, Ostlund G. Live experience of thai women with alcohol addiction. Asian Nurs Res 2017;11:304-10. doi:10.1016/j.anr.2017.12.001

8. Afrasiabi H, Farhani N. Qualitative study of a background of drug use among in yazd. JSBCH 2017;1:27-35.

9. Mirzakhani F, Khodadadi Sangdeh J, Nabipour AR. Marital factors affecting addication among Iranian women: aqualitative study. Journal of Substance Ues 2020;25:28-33. doi:10.1080/14659891.2019.1659867

10. Helmy TI, Malk MI, Salem GM. The risk factors that lead to addiction and relapse among addicted patients. Menoufia Nursing Journal 2016;1:9-23. doi:10.21608/MENJ.2016.120313

11. Ranjbaran M, Mohammadshahi F, Mani S, Karimy M. Risk factors for addiction potential among college students. Brief Communication 2018;9:17. doi:10.4103/ijpvm.IJPVM_403_16

12. Soltani L, Zeinali A. The role of parenting styles, addiction proneness of parents and Child's temperament in predicting the addiction proneness of adolescent students. Etiadpajohi 2020;13:127-46.

13. Khairi AF, Rahman HA, Muthiah SG. Risk factors of drug abuse among Malay males settlers in jerantut Malaysia. J Subst Abuse Alcohol 2017;5:1066.

14. Banafsheh H, Mesdaghinia A, Ghoreishi FS, Gilasi H, Kashani Z, Gholami M, et al. The survey of pattern of abusing and causes of addiction tendency among women undergoing methadone maintenance treatment in Kashan city during 2017-2018. Feyz 2018;22:532-8.

15. Mirzakhani F, Khodadadi Sangdeh J. Psychological factors predisposing women to addiction: A qualitative study. J Mazandaran Univ Med Sci 2017;26:332-44.

16. Depalo F, Caprs N, Simomelli A, Salcuni S, Riso DD. Parenting quality in drug-addicted mothers in a therapeutic mother-child community: The contribution of attachment and personality assessment. Front Psychol 2014;10:1009. doi:10.1016/s0306-4603(00)00119-2

17. Gordon A, Cone EJ, Depriest AZ, Axford-Gatley RA, Passik SD. Prescribing opioids for chronic noncancer pain in primary care: risk assessment. Postgrad Med 2014;126:159-66. doi:10.3810/pgm.2014.09.2810

18. Verhoogs S, Dopmeijer JM, De Jonge JM, Vander Heijde CM, Vonk P, Bovens RH, et al. Consumption as an indicator of hazardous alcohol use among university students. Eur Addict Res 2020;26:1-9. doi:10.1159/000503342

19. Ati-Daoud N, Blevins D, Khanna S, Sharma S, Holstege CP, Amin P. Women and Addiction: An update. Med Clin Noth Am 2019;103:699-710. doi:10.1016/j.mcna.2019.03.002

20. Amiri M, Taheri Z, Hosseini M, Mohsenpour M, Davidson PM. Factors affecting tendency for drug abuse in people attending addiction treatment centres: A quantitative content analysis. J Addict Res Ther 2016;27:270. doi:10.4172/2155-6105.1000270

21. Rimaz S, Dastoorpour M, Merghati khoii E, Mohseni S. Demographic variables associated with relapse in women and men referred to the selected addiction treatment centers in Tehran, 2009: A case- control study. RJMS 2013;20:63-72.

22. Asadi SM, Porzoor P. Investigating the causes of tendency to use substances (addiction) in Ardabil. Etiadpajohi 2020;14:169-98. doi:10.29252/etiadpajohi.14.56.169

23. Mohammad Khani S. Risk and protective factors of alcohol, tobacco and other illicit drugs used among 13 to 18 years old adolescents. Educational Psychology 2008;4:38-64.

24. Rahimi Movaghar A. A review on the prevalence and patterns of drug abuse in women in Iran. Social Welfare 2004;3:203-26.

25. Botvin GJ. Preventing drug abuse in school: Social and competence enhancement approachs targeting individual-level etiological factors. Addict Behav 2000;25:887-97. doi:10.1016/s0306-4603(00)00119-2