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**ABSTRACT**

of the dissertation for the degree of Doctor of Philosophy

**SOCIO-PSYCHOLOGICAL REHABILITATION  
OF PSYCHOACTIVE SUBSTANCE USERS**

Speciality: 6114.01 – Social Psychology

Field of science: Psychology

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**Baku–2025**

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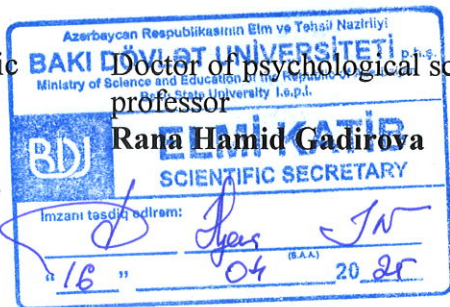
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## INTRODUCTION

**Relevance of the topic and degree of elaboration.** Nowadays, a number of addictions that have emerged and become global in connection with the development of society have endangered not only the physical health of people, but also their psychological health. Such problems are one of the global problems not only of psychology, but also of society and humanity. Statistics of recent years show that the number of people using psychoactive substances is constantly increasing. It should be noted that the use of psychoactive substances, which is considered the scourge of the modern era, has penetrated all areas, and has a negative impact on the rhythm of public life. Currently, the use of psychoactive substances, which is the most dangerous problem of humanity, has attracted the attention of the whole world. In this regard, combating it and determining ways to eliminate it is considered one of the most important issues facing all humanity today.

It is important to highlight that addressing the issue of psychoactive substance users is regarded as a matter of significant state priority. Factories and plants, enterprises and institutions, and the state as a whole suffer great material losses due to them. People who abuse drugs experience decreased productivity, and in general, interest in work, family, and friends is completely lost. All of these are considered the most important symptoms of psychoactive substance users, which are increasing day by day.

Psychoactive substance users experience psychological and physiological changes, which result in behavioral problems in psychoactive substance users. This leads to very serious problems in their behavior, such as changeable emotionality, inadequate emotional reactions, unpredictable moods, irritability, and aggression. Such a situation leads to difficulties in interpersonal relationships, conflicts, arguments, and other aggressive behaviors.<sup>1</sup>

Recently, the widespread use of harmful substances and the identification of its biological, social, and psychological mechanisms

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<sup>1</sup> Miller, W.R., Carroll, K.M. The Cambridge Handbook of Substance and Behavioral Addictions. // Cambridge University Press. -2020. -p.12-13.

of action have made rehabilitation work with substance users urgent. As a result of extensive research, experts have come to a common opinion and determined that the rehabilitation process with a psychoactive substance user should not be directed against the psychoactive substance, but against the fear of the substance user hiding in the world of pleasant feelings and fantasies when taking a psychoactive substance, escaping from real life, that is, finding solutions to the motivational sphere and socio-psychological problems and correcting the current situation. Therefore, medical, social, and psychological rehabilitation of patients with psychoactive substance addiction is one of the priority areas of narcology.

From the analysis of the conducted studies, it is clear that the socio-psychological rehabilitation of psychoactive substance users has been studied in various aspects. Based on the analysis of the existing literature on the problem, three directions can be distinguished:

1. Studies conducted in the medical direction;
2. Studies conducted in the clinical psychology and psychotherapeutic direction;
3. Studies conducted in the socio-psychological direction.

As a result of research conducted in all directions, it can be said that individual aspects of the problem have been brought into focus, and the level of its manifestation and complications has been studied.

In the studies conducted in the first direction, the etymology and course of this problem, as well as the complications it can cause, have been brought into focus.

The second direction is research conducted in clinical psychology and psychotherapy. These studies mainly touch on the role of psychological assistance provided to psychoactive substance users and the effective therapy methods in this process.

The third direction is research conducted more in the socio-psychological direction. Here, the main issue is the role of socio-psychological factors that lead to the use of psychoactive substances.

In the research process, we benefited from the works of our prominent scientists A.S.Bayramov, M.A.Hamzayev, A.A.Alizade, B.H.Aliyev, R.A.Javadov, S.I.Seyidov, R.I.Aliyev, E.I.Shafiyeva, R.H.Qadirova, R.V.Jabbarov, M.H. Mustafayev and others, and used

them as a base system. During the study of the problem of addiction to psychoactive substances and the process of socio-psychological rehabilitation, a systematic approach to the study of the personality of an opium user was developed by V.M.Bekhterev, F.V.Basin, B.D.Karvasarsky, activity and integrative approaches to the rehabilitation process by B.G.Ananyev, A.A. Bodalyov, V.V. Kozlov, V.V. Novinkov, a complex approach to personality diagnostics by E. Lichko, V.V. Stolin, and by T.A.Donskikh in 1990. The problem was also investigated by T.P.Korolenko in 1976, 1978, 1990; by L.G.Leonov and N.L.Bochkaryov in 1998, C.Nakken in 1988; Schaef A.F, Fassel D. in 1988; Segal B. in 1988. In 1990, Moody G developed an approach to addiction to psychoactive substances as a type of addictive behavior (within the framework of this approach, the use of psychoactive substances was viewed as a way for the individual to self-regulate unpleasant mental states); in 1975, Y.E.Sosnovikov; in 1997, T.M.Maryutin, O.Y.Yermolayev formulated the idea that functional states are systemic phenomena with a certain structure; in 1995, O.S.Kopina, E.A.Suslova, E.V.Zaikin formulated the idea that the structure of psycho-emotional tension states is a manifestation of various unpleasant emotional states, in which negative affect symptoms (frustration, stress, anxiety, depression) predominate.<sup>1</sup>

**The object and the subject of the research.** The object of the study is the process of socio-psychological rehabilitation. The subject of the study is the regularities and characteristics of the rehabilitation process of those addicted to psychoactive substances.

**The purpose of the research** is to analyze the personality traits and behavior of people addicted to psychoactive substances with the help of special methods and psychological experiments and to develop recommendations related to this. To achieve the goal, the following tasks have been set:

1. Study of the socio-psychological characteristics of individuals included in the research group of people addicted to psychoactive substances, and the socio-psychological conditions that enable their

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<sup>1</sup> Mustafayev, M.H., Allahverdiyev, R.F. Psixoaktiv maddə istifadəçilərinin sosial-psixoloji reabilitasiyasında həyata keçirilən terapiya üsulları və müasir yanaşmalar.// -Bakı: Bakı Dövlət Universiteti, Psixologiya jurnalı. -2020. –s.55-65.

socio-psychological rehabilitation.

2. Identification of the criteria for destructive personality changes in the research group of people addicted to psychoactive substances:

1. Study of the dynamics of the socialization of the personality and the formation of social values in the process of socio-psychological rehabilitation.

2. Development and preparation of a program for psychological support of people addicted to psychoactive substances and the development of methodological recommendations for its implementation in stationary conditions.

**Hypothesis of the study.** Systematic socio-psychological rehabilitation using psychological means creates conditions for the socialization of the personality and the establishment of harmonious interpersonal relationships.

In the course of the study, along with this main hypothesis, some additional hypotheses were put forward:

- The process of socio-psychological rehabilitation helps to eliminate destructive personality changes.

- The use of active socio-psychological methods in a group of people addicted to psychoactive substances creates conditions for the formation of effective interaction.

- A compensatory system of constructive personality development is formed during specific socio-psychological rehabilitation.

The purpose of the study and the hypotheses put forward allow us to determine the following tasks of the work:

1. Conceptual analysis of various research works, and scientific literature samples dedicated to the problem of addiction to psychoactive substances, as well as practical programs and methods for socio-psychological rehabilitation.

2. Study of the socio-psychological characteristics of individuals included in the research group of people addicted to psychoactive substances, and the socio-psychological conditions that enable their socio-psychological rehabilitation.

3. Identification of the criteria for destructive personality changes in the research group of people addicted to psychoactive substances.

4. Study of the dynamics of the socialization of the personality and the formation of social values in the process of socio-psychological rehabilitation.

5. Development of a program for psychological support of people addicted to psychoactive substances and the presentation of methodological recommendations for its implementation in inpatient conditions.

**Research methods.** In the research process, the necessary methods were used to implement specific tasks related to the study of the problem of socio-psychological rehabilitation of people addicted to psychoactive substances: observation, questionnaire survey with people addicted to psychoactive substances, cognitive behavioral therapies, and quantitative and qualitative analysis of results.

200 people aged 18-55 years old who were receiving inpatient treatment at the Republican Narcology Center of the Ministry of Health of the Republic of Azerbaijan located in Baku participated in the study. A quantitative and qualitative analysis of the results obtained was conducted, and the SPSS-21 mathematical and statistical program was used to process the final results.

**Scientific novelty of the research.** For the first time in Azerbaijan, the behavior of psychoactive substance users is being investigated from a social psychological perspective, the causes of psychoactive substance use, its impact on the psyche, behavior and relationship system are being studied, and effective ways of eliminating them are being identified.

Scientific approaches to the causes of dependence on psychoactive substances and changes in the psychological status of the personality have been systematized and analyzed in terms of their use in rehabilitation work. A systematic analysis of the socio-psychological rehabilitation of persons dependent on psychoactive substances in Azerbaijan has been conducted, and positive and negative profiles of socio-psychological rehabilitation have been identified.

In order to search for and identify directions for providing effective rehabilitation assistance to those dependent on psychoactive substances, an analysis of theoretical materials and foreign experience in correctional and rehabilitation work has been carried out, and

general principles of such work have been identified. The general principles of rehabilitation work with those dependent on psychoactive substances in inpatient conditions are based on the impact of all participants in the rehabilitation process on the existing resources in the personality spheres.

- A comprehensive analysis of the socio-psychological characteristics of individuals dependent on psychoactive substances receiving inpatient treatment in Azerbaijan has been carried out, which creates conditions for expanding the possibilities of implementing the rehabilitation process. In addition to the traditional directions of rehabilitation work (correction of the emotional and volitional spheres of the personality), it has been proven that it is necessary to develop the cognitive activity of patients dependent on psychoactive substances.

- On the basis of the identified directions of socio-psychological rehabilitation, a program for socio-psychological support of the process of receiving inpatient treatment of individuals dependent on psychoactive substances at the initial stage has been developed. The basis of the program is a cognitive-cognitive approach, which, in turn, consists in understanding the individual's potential and readiness to increase his cognitive activity by mastering various forms of behavior in the field of self-study.

- The dynamics of personality changes and the harmony of interpersonal relationships in the process of socio-psychological rehabilitation implemented in a group of individuals dependent on psychoactive substances have been determined.

- A comparative analysis of personality development and the study of constructive interpersonal relationships in individuals dependent on psychoactive substances was carried out in a rehabilitation center.

### **The main provisions defended:**

1. The process of personality dependence on psychoactive substances is conditioned by mental, social and pedagogical factors. An individual dependent on psychoactive substances is exposed to damage at all levels of life activity: organism, psyche, socio-psychological sphere, knowledge, skills and habits. Therefore, an effective socio-psychological rehabilitation system should include restorative



measures that can affect all damaged levels. A systematic approach to the correction of the personality and the environment in which it exists has a more adequate effect on the psychological structure of dependence on psychoactive substances.

2. The awareness of those dependent on psychoactive substances of their own socio-psychological potential and capabilities, and their use of them to change themselves and situations should form the basis of practical rehabilitation work.

3. The following occurs in the structure of a personality dependent on psychoactive substances:

- in the cognitive sphere: weakening of memory and thinking against the general background of the preservation of other cognitive processes;

- in the volitional sphere: disruption of the process of individual self-regulation;

- acute disruption of the emotional sphere;

- disruption of the psychophysiological self-regulation system;

- disruption of the “self-concept” and, in parallel, the formation of distorted compensatory ideas about oneself;

- the formation of a new specific value system among personal characteristics is identified;

- disruption of the system of interpersonal relationships in the family, in the process of educational or professional activity;

- the formation of rigid role-based behavioral structures;

- the formation of a system of ideas about the value and significance of transpersonal experience in experiences.

4. An effective rehabilitation system in stationary conditions should include restorative socio-psychological measures to influence all levels of the damaged personality. It is important to make special psychological, pedagogical and organizational efforts for the coordinated interaction between the three main elements of the rehabilitation system: the rehabilitation environment, the rehabilitation subject and group activities. For this reason, during the rehabilitation of those addicted to psychoactive substances, the main attention should be focused on the cognitive and perceptual approach of the individual, which implies their self-understanding of their own potential, preser-

ved resources and readiness to understand, develop and change their own disturbed personality spheres.

5. In the rehabilitation process, the personality demonstrates a significant transformation towards a high degree of adaptation and stabilization, their internal and external conflicts decrease, their social interest increases, their communicative skills develop, and their productive activity significantly increases.

6. Exercises based on transpersonal psychology methods create conditions for the emergence of situations that are important for the subject, which allows them to develop personally and achieve inner harmony.

7. As a result of socio-psychological rehabilitation and the development of reflection, the discrepancy between self-concept and self-perception disappears, the "perceived and non-perceived" parts of the personality's "I-concept" become closer to each other and normalize.

**Theoretical and practical significance of research.** The results of the study enrich general and clinical psychology, psychophysiology with new knowledge. The identification and systematization of socio-psychological regularities for the socio-psychological explanation of personality in individuals dependent on psychoactive substances have been achieved. The results of the study can be used as a scientific and theoretical source in the teaching of social psychology and clinical psychology, as well as certain special subjects. The results obtained in the study can be used in psychotherapy of individuals dependent on psychoactive substances, in the education of young people regarding a healthy lifestyle. The created conceptual foundations and recommendations are a valuable source in the scientific and practical activities of specialists working in this field, in conducting educational work. The materials of the research work can be used in the preparation of scientific and methodological recommendations, textbooks and teaching aids, and in the research work of scientific workers.

**Research approval and implementation.** The results of the research have been reflected in the author's articles and theses published in local and international scientific press. He has conducted lectures and seminars at Baku State University.

**The name of the institution where the dissertation work was performed.** Department of Social and Pedagogical Psychology

of the Baku State University.

**Dissertation structure.** The dissertation consists of an introduction (16675 characters), Chapter I (61439 characters), Chapter II (111978 characters), Chapter III (49049 characters), conclusion (28402 characters), list of used literature (20488 characters), in total - 287927 characters.

## THE MAIN CONTENT OF THE DISSERTATION.

The introduction substantiates the relevance of the problem, the level of its development, determines the goals and objectives of the research, the object and subject, the hypothesis, methods, scientific novelty, the theoretical and practical significance of the research, and presents the main provisions put forward for defense.<sup>1</sup>

The first chapter of the dissertation, entitled “**Scientific research on the socio-psychological study of psychoactive substance addiction**”, consists of two subchapters. The first subchapter of the first chapter, entitled “**The process of formation of addiction to psychoactive substances**”, clarifies the hypotheses put forward by representatives of the main scientific approaches in psychology regarding substance addiction. Here, the content of this concept is explained, the psychological research conducted in this area is systematized, that is, the works of researchers who tried to study the problem are analyzed, and the genesis of the concept of adaptation is clarified. It is noted that there are various approaches to the process of substance addiction. The psychological characteristics of users of psychoactive substances were investigated, the psychopathological states they experienced in the period after taking psychoactive substances were examined from a socio-psychological aspect, and the results of research conducted in this field were noted. At the same time, the socio-psychological problems caused by addiction to psychoactive substances were widely commented on by the author.

In the second subchapter of the first chapter, entitled “**Socio-**

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<sup>1</sup> Mars, S.G. Every 'never' I ever said came true: transitions from opioid pills to heroin injecting / S.G.Mars, P.Bourgois, G.Karandinos [et al.] // International Journal of Drug Policy, -2014. №25 (2), -p. 124.

**psychological changes manifested in addicted persons**”, the mechanisms of socio-psychological changes manifested in addicted persons are clarified. The concept of addiction, addictive behavior, the dynamic development of personality and socio-psychological changes occurring at different stages of addiction in people addicted to psychoactive substances, scientific approaches to the problem of psychological addiction arising during the use of psychoactive substances, and the modern state of scientific research conducted on addiction are analyzed. This subchapter also clarifies and systematizes the directions of research on addiction.

The second chapter of the dissertation, entitled **“Organization of the process of socio-psychological rehabilitation of people addicted to psychoactive substances”**, consists of three subchapters. The organization of the socio-psychological rehabilitation process, systematic theories in the field of socio-psychological rehabilitation of psychoactive substance users and scientific approaches to the current problem, various methods, techniques, programs, therapies applied during rehabilitation, and issues related to the analysis of the main characteristics of rehabilitation conditions are analyzed and socio-psychological aspects are studied. The basis of psychological rehabilitation of individuals dependent on alcohol and psychoactive substances is motivational work to change their behavior and progress towards recovery, as well as relapse prevention.

The second subchapter of the second chapter is called **“Preparation for the socio-psychological rehabilitation process and rules for implementing the Motivational Interviewing technique”**. Based on the research on this chapter, if a person addicted to psychoactive substances does not realize the need for radical changes in his thinking and lifestyle, then the treatment and rehabilitation carried out on the basis of the above will not be successful. Overcoming addiction is a long-term process consisting of several specific stages. At each stage, certain tasks must be solved and certain skills must be developed. If a person addicted to psychoactive substances is not ready to constantly move forward in this direction, fully fulfill the tasks set and achieve the goals, if he constantly avoids changes and does not try to effectively eliminate this problem, then an accident is inevitab-

le. In this regard, the need to work on motivation arises at all stages and steps of a person's recovery. In this regard, the study and analysis of this chapter is a very important criterion.

In the third subchapter of the second chapter, entitled **“Analysis of the main characteristics of rehabilitation conditions and various methods applied in the rehabilitation process”**, social psychological issues related to the organization of the socio-psychological rehabilitation process of persons dependent on psychoactive substances are analyzed in this chapter. In this chapter, the author analyzes and systematizes systematic theories and scientific approaches to the existing problem in the socio-psychological rehabilitation process. At the same time, the rules for preparing for the socio-psychological rehabilitation process and implementing the motivational interview technique are explained, and various methods applied in the rehabilitation process and the main characteristics of rehabilitation conditions are analyzed.<sup>1</sup>

The third chapter of the dissertation, entitled **“Research of the process of socio-psychological rehabilitation of psychoactive substance users”**, is devoted to the description, analysis and interpretation of the scientific research conducted by the author. The first subchapter of the third chapter, entitled **“Research organization, execution, and analysis”**, describes the methods used in the research process. This study involved 200 people aged 18-55 who were receiving inpatient treatment at the Republican Narcology Center of the Ministry of Health of the Republic of Azerbaijan located in Baku. At the end, a quantitative and qualitative analysis of the results obtained was conducted, and the SPSS-21 mathematical and statistical program was used to process the results.

The second subchapter of the third chapter is called **“Socio-demographic characteristics of the subjects and determination of the psychological state”**. This subchapter analyzes the results of the study. First, a statistical analysis of demographic indicators is given, which plays an important role in clarifying the degree of influence of

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<sup>1</sup> Miedl, S.F., Peters, J. & Buchel, C. Altered neural reward representations in pathological gamblers revealed by delay and probability discounting. // Archives of General Psychiatry, -2012. 69(2), -p.177.

various factors. Through surveys, the author interprets the formation and development of personality dependence on psychoactive substances and the factors influencing this development. The author does not limit himself to simply listing the causes of such behavior, but also provides information on ways to eliminate them, as well as on psychoprophylactic and rehabilitation measures that are of great importance in this direction.

The third subchapter of the third chapter is entitled “**The results achieved through socio-psychological work with psychoactive substance users and their practical implications**”.

It should also be noted that all these indicators reflecting the demographic characteristics of the subjects in the experimental and control groups are reflected in table 1. Therefore, let us take a closer look at table 1.

### **Demographic characteristics of the experimental and control group subjects**

**Table 1**

Demographic characteristics		Experimental group		Control group	
		N	%	N	%
<b>Age</b>	<i>18-25 y/o</i>	57	38%	21	42%
	<i>25 years and older</i>	93	62%	29	58%
<b>Gender</b>	<i>Female</i>	22	15%	11	22%
	<i>Male</i>	128	85%	39	78%
<b>Education</b>	<i>Higher</i>	83	55%	31	62%
	<i>Secondary</i>	67	45%	19	38%
<b>Marital status</b>	<i>Married</i>	64	43%	22	44%
	<i>Single</i>	41	27%	15	30%
	<i>Divorced</i>	45	30%	13	26%
<b>Employment</b>	<i>Yes</i>	28	19%	8	16%
	<i>No</i>	122	81%	42	84%
<b>Number of children</b>	<i>No</i>	82	55%	29	58%
	<i>1</i>	54	36%	15	30%
	<i>2 and more</i>	14	9%	6	12%
<b>Total</b>		150	100%	50	100%

The subjects were asked some questions about their use of psychoactive substances and the results obtained are listed in Table 2.

To the question “How many years have you been using psychoactive substances?”, 20% of the subjects in the experimental group answered “1 year”, 37% - “2-7 years”, and 43% - “7 and above”. In the control group, 22% of the subjects in the same question answered “1 year”, 46% - “2-7 years”, and 32% - “7 and above”. To the question “What substance did you use first?”, 60% of the subjects in the experimental group stated that they had started abusing cannabinoids, 9% - psychostimulants, 7% - opioids, 2% - hallucinogens, 4% - depressants, and 18% - alcoholic beverages. In the control group, 42% of the subjects reported that they started their addiction through cannabinoids, 16% through psychostimulants, 6% through opioids, 4% through hallucinogens, 8% through the studied depressants, and 24% through alcoholic beverages. When asked “Which substance are you currently using?”, 33% of the subjects in the experimental group reported that they were using alcohol, 1% through cannabinoids, 39% through psychostimulants, 20% through opiates, 5% through hallucinogens, and 2% through depressants. In the experimental group, 38% of the subjects in the experimental group reported that they were using alcohol, 6% through cannabinoids, 32% through psychostimulants, 12% through opioids, 8% through hallucinogens, and 4% through depressants. The next question in the questionnaire was “At what age did you first use a psychoactive substance?”. 59% of the participants in the experimental group in which the study was conducted reported that they started using psychoactive substances “at the age of 12-18”, 29% at the age of 18-25”, and 12% at the age of “over 25”. 62% of the participants in the control group reported that they started using psychoactive substances “at the age of 12-18”, 22% at the age of “18-25”, and 16% at the age of “over 25”. It was found that 59% of the participants in the experimental group involved in the study started using psychoactive substances at the age of 12-18, 29% at the age of 18-25, and 12% at the age of over 25. In the control group, 62% of the subjects started using substances between the ages of 12-18, 22% between the ages of 18-25, and 16% over the age of 25.

In the next question, the subjects were asked “What is the number of treatments you have received so far?” In response to this question, 20% of the subjects in the experimental group indicated that this

was their first treatment, 65% indicated that it was their 2nd-3rd treatment, and 15% indicated that it was their 4th or more treatment. 24% of the subjects in the control group indicated that this was their first treatment, 56% indicated that it was their 2nd-3rd treatment, and 20% indicated that it was their 4th or more treatment. 51% of the subjects in the experimental group indicated that they were involved in treatment under duress, 14% indicated that they were actually voluntary, and 35% indicated that they were formally voluntary. Of the subjects in the control group, 54% indicated that they were involved in forced labor, 18% in real voluntary labor, and 28% in formal voluntary labor. 17% of the subjects in the experimental group had a criminal record, 83% of the subjects did not have a criminal record, 12% of the subjects in the control group had a criminal record, and 88% of the subjects did not have a criminal record. The indicators for all these questions are reflected in Table 2 (see Table 2).

### **Demographic characteristics of the subjects in the experimental and control groups**

**Table 2**

		<b>Experimental group</b>		<b>Control Group</b>	
		N	%	N	%
<b>How many years the person has been using substance?</b>	1	29	20%	11	22%
	2-7	56	37%	23	46%
	7 and more	65	43%	16	32%
<b>What substance did the person start with?</b>	Cannabinoids	90	60%	21	42%
	Psychostimulants	13	9%	8	16%
	Opiates	10	7%	3	6%
	Hallucinogens	3	2%	2	4%
	Depressants	6	4%	4	8%
	Alcohol	28	18%	12	24%

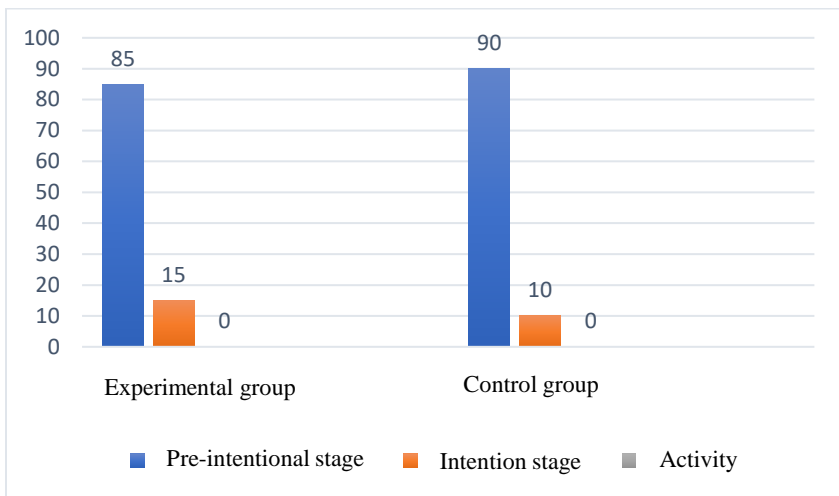


**Next Table 2**

<b>What substance does the person continue with?</b>	Alcohol	50	33%	19	38%
	Cannabinoids	2	1%	3	6%
	Psychostimulants	58	39%	16	32%
	Opiates	30	20%	6	12%
	Hallusinogens	7	5%	4	8%
	Depressants	3	2%	2	4%
<b>At what age did the person first use?</b>	12-18 years	88	59%	31	62%
	18-25 years	43	29%	11	22%
	25 years and older	19	12%	8	16%
<b>How many treatments did the person have?</b>	1	30	20%	12	24%
	2-3	97	65%	28	56%
	4 and more	23	15%	10	20%
<b>Involvement in treatment</b>	Compulsory	76	51%	27	54%
	Real volunteer	21	14%	9	18%
	Formal volunteer	53	35%	14	28%
<b>Convicted</b>	Yes	26	17%	6	12%
	No	124	83%	44	88%
<b>Total</b>		150	100%	50	100%

The graph below shows how ready the subjects were to start substance abuse treatment using the “Readiness for Change and Adherence to Treatment” scale. This method was applied to both groups. It was found that 85% of the subjects in the experimental group were still in the pre-intentional stage of readiness for change, and 15% were in the intention stage. 90% of the subjects in the control group were in the pre-intentional stage of readiness for change, and 10% were in the intention stage.

The pre-test result of the “Readiness for Change and Adherence to Treatment” scale of the volunteer participating in the study is 19 points. This means that the subject is in the pre-intentional stage of readiness for change.

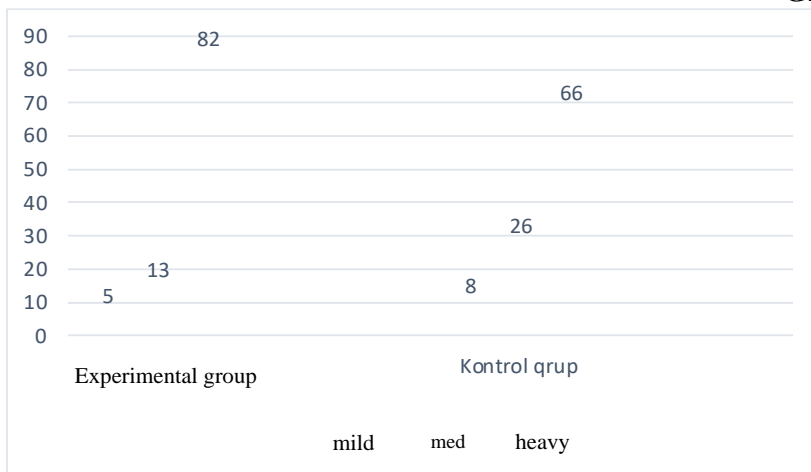


**Figure 1. Pre-test results of the subjects in the experimental and control groups on the “Readiness for Change and Adherence to Treatment” scale**

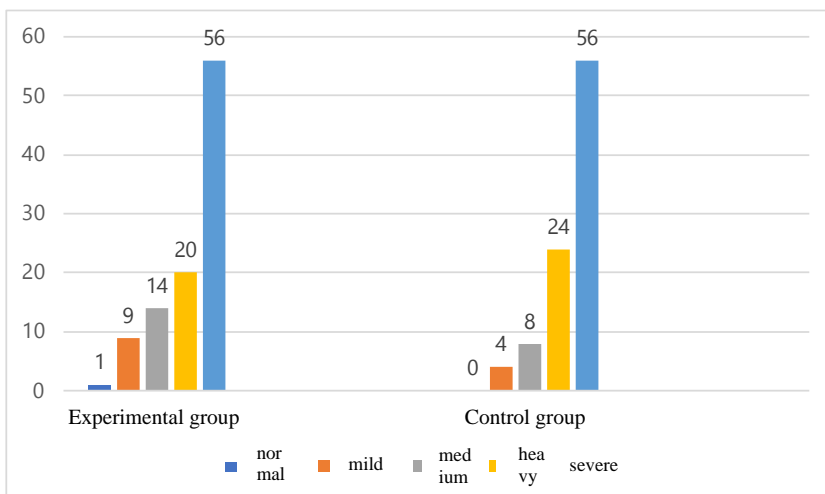
Then, dozens of different psychological tests were conducted and scales were applied to evaluate the subjects from other psychological aspects. The graph below shows the results of the “Hamilton Anxiety Rating Scale”. It was determined that 5% of the subjects in the experimental group had mild anxiety disorder, 13% had moderate anxiety disorder, and 82% had severe anxiety disorder. The results in the control group were as follows. Thus, 8% of the studied individuals were diagnosed with mild anxiety disorder, 26% with moderate anxiety disorder, and 66% with severe anxiety disorder. What we have said can be clearly seen in graph 2 (see graph 2).

Graph 3 presents the results of the “Hamilton Depression Rating Table”. According to the results obtained, the results of the subjects in the experimental group were as follows: 1% of the participants were normal, 9% had mild depressive disorder, 14% had moderate, 20% had severe, and 56% had severe depressive disorder. None of the subjects in the control group had normal results. In addition, 4% of them had mild depressive disorder, 8% had moderate, 24% had severe, and 56% had severe depressive disorder. All of these results we have mentioned are clearly illustrated in graph 3, which can also be viewed below (see graph 3).

**Graph 2**



**Figure 2. Pre-test results of the “Hamilton Anxiety Rating” table of the experimental and control group subjects**



**Figure 3. Pre-test results of the subjects in the experimental and control groups on the “Hamilton Depression Rating” table**

The next section examined the relationship between the subjects' willingness to change and adherence to treatment and the phobic anxiety subscale, where a statistically significant inverse relationship was found ( $p < 0.05$ ). As the subject's phobic anxiety level increases, their willingness to change and adherence to treatment begin to decrease, or vice versa. According to Spearman's correlation, there is a statistically strong inverse relationship between willingness to change and adherence to treatment and paranoid thinking ( $p < 0.05$ ). This means that as paranoid thinking increases in the subjects, their willingness to change decreases. During the analyses we conducted between the psychoticism subscale and the willingness to change and adherence to treatment scale, it was found that there is a statistically significant relationship in the opposite direction ( $p < 0.05$ ). In the participants involved in the study, as the symptoms of psychosis increase, the willingness to change and adherence to treatment decrease, or vice versa, as the symptoms of psychosis decrease, the willingness to change and adherence to treatment increase. All this is reflected in Table 3 (see Table 3).

Table 3 shows the comparison of demographic characteristics with the "Willingness to change and adherence to treatment" scale in the experimental group. During this comparison, the results of the Mann-Whitney U test, Kruskal-Wallis H and Anova test were examined. According to the results of the Mann-Whitney U test, a statistically significant relationship was determined between the willingness to change and treatment adherence of the subjects and their age ( $p < 0.05$ ).

The relationship between the number of years the subjects have been users and their willingness to change and treatment adherence was also examined. According to the results of the Anova test, there is a statistically significant strong relationship between the number of years the subjects have been users and their willingness to change and treatment adherence ( $p < 0.05$ ). Thus, it was determined that as the number of years increases, the willingness to change also begins to decrease. Subjects who have been substance users for 1 year are more willing to change than subjects who have been users for 2-3 years and 4 or more years. The group of users for 2-3 years are also

more willing to change and adhere to treatment than the subjects who have been using for 4 or more years.

**Results of Spearman correlations between the “Willingness to change and adherence to treatment” scale and the “Brief Symptom Inventory” in the experimental group**

**Table 3**

<b>Willingness to Change and Treatment Adherence Scale</b>		
<b>Somatization</b>		-0,101**
		<b>0,000</b>
		145
<b>Obsessive-compulsive</b>		-0,224**
		<b>0,000</b>
		145
<b>Interpersonal relationships</b>		0,187**
		<b>0,002</b>
		145
<b>Depression</b>		-0,387**
		<b>0,000</b>
		145
<b>Anxiety disorder</b>		-0,423**
		<b>0,000</b>
		145
<b>Resentment, hostility</b>		-0,324**
		<b>0,000</b>
		145
<b>Phobic anxiety</b>		-0,223**
		<b>0,004</b>
		145
<b>Paranoid ideation</b>		-0,121**
		<b>0,000</b>
		145
<b>Psychoticism</b>		-0,116**
		<b>0,000</b>
		145

Our study allows us to draw the following conclusions:

The pre-test results on the “Personal Health Assessment (HONOS)” scale were as follows: 1% of the experimental group of sub-

jects had no problems or had a slight problem, 5% had a mild problem, 25% had a moderate problem, and 69% had a severe problem. In the control group, none of the subjects had results within the norm, in addition, 6% of the subjects had a mild problem, 36% had a moderate problem, and 58% had a severe problem.

The post-test results among the subjects studied on this scale were as follows: 67% of the experimental group participants had no problems or had a slight problem, 25% had a mild problem, 6% had a moderate problem, and 2% had a severe problem. None of the subjects studied in the control group had results within the norm, 4% had a mild problem, 23% had a moderate problem, and 73% had a severe problem.

The results of the Brief Symptom Inventory were as follows:

Pre-test results: in the experimental group, 7% of the subjects were normal, 8% of the subjects were low, 23% of the subjects were moderate, and 62% of the subjects were severely somatization-problem, while in the control group, 6% of the subjects were normal, 22% of the subjects were low, 28% of the subjects were moderate, and 44% of the subjects were severely somatization-problem.

Post-test results: according to the results of the somatization subscale, it was determined that in the experimental group, 70% of the subjects were normal, 21% of the subjects were low, 5% of the subjects were moderate, and 4% of the subjects were severely somatization-problem, while in the control group, 4% of the subjects were normal, 25% of the subjects were low, 29% of the subjects were moderate, and 42% of the subjects were severely somatization-problem.

Pre-test results on the obsessive-compulsive disorder subscale: 9% of the subjects in the experimental group were normal, 10% had low, 23% had moderate, and 58% had severe obsessive-compulsive disorder. In the control group, 10% of the subjects showed normal results, 18% had low, 32% had moderate, and 40% had severe obsessive-compulsive disorder.

The post-test results on this subscale were as follows: according to the results of the obsessive-compulsive disorder subscale, 39% of the subjects in the experimental group were normal, 33% had low, 15% had moderate, and 13% had severe obsessive-compulsive disorder. In the control group, 8% of the subjects had normal, 21% had low, 27% had

moderate, and 44% had severe obsessive-compulsive disorder.

Pre-test results: none of the subjects in the experimental group had normal interpersonal relationships, and 1% of the subjects had low, 16% had moderate, and 83% had severe interpersonal problems. In the control group, none of the subjects had normal or low interpersonal problems, and 22% had moderate, and 78% had severe interpersonal problems.

Post-test results were as follows: 60% of the subjects in the experimental group had normal results, and 21% of the subjects had low, 7% had moderate, and 23% had severe interpersonal problems. None of the subjects in the control group had normal interpersonal relationships, 4% of the subjects had low, 23% had moderate, and 73% had severe interpersonal relationship problems.

Pre-test results - 2% of the subjects in the experimental group were normal, 11% had low, 13% had moderate, and 74% had severe depression. In the control group, 2% had low, 26% had moderate, and 72% had severe depression. No normal level of depression was observed in the control group.

Post-test results - 61% of the subjects in the experimental group had normal results, and 13% had low, 6% had moderate, and 20% had severe depression. In the control group, 4% of the subjects had low, 21% had moderate, and 75% had severe depression. The normal level of depression was not observed in the control group.

In the experimental group, anxiety disorder was recorded in 5% of the subjects, low-grade anxiety disorder in 9%, moderate anxiety disorder in 85%. In the control group, the results were as follows: low-grade anxiety disorder was detected in 8% of the subjects, moderate anxiety disorder in 24%, and severe anxiety disorder in 68%. The normal level of anxiety disorder was not observed in the control group.

Post-test results - in the experimental group, 60% of the subjects had normal anxiety disorder, 17% had low-grade anxiety disorder, 7% had moderate anxiety disorder, and 16% had severe anxiety disorder. The results in the control group were as follows: no normal level of anxiety disorder was observed. 6% of the subjects were diagnosed with low-grade anxiety disorder, 29% with moderate anxiety disorder, and 65% with severe anxiety disorder.

Pre-test results - according to the results obtained on the paranoid thinking scale among the subjects in the experimental group, it was revealed that 1% of the subjects were normal, 8% of the subjects were low, 23% of the subjects were moderate, and 68% of the subjects were severely paranoid. In the control group, 2% of the subjects were normal, 6% of the subjects were low, 14% of the subjects were moderate, and 78% of the subjects were severely paranoid.

Post-test results - according to the results of the paranoid thinking scale of the subjects in the experimental group, 53% of the subjects were normal, 28% of the subjects were low, 8% of the subjects were moderate, and 11% of the subjects were severely paranoid. In the control group, 6% of the subjects showed mild, 15% moderate, and 79% severe paranoid disorder. There were no normal levels of the subjects in this group.

Pre-test results - no subjects with normal levels of psychoticism were found in the experimental group. In addition, 4% of the subjects had low, 19% had moderate, and 77% had severe psychotic symptoms. Among the subjects in the control group, the normal level of psychoticism was not observed as in the experimental group. In addition, 4% of the subjects had low, 20% had moderate, and 76% had severe psychotic symptoms.

Post-test results - 39% of the subjects in the experimental group had normal psychotic symptoms, 36% had low, 21% had moderate, and 4% had severe psychotic symptoms. In the control group, 6% of the subjects had normal levels, 21% had low, 73% had moderate, and 4% had severe psychotic symptoms.

According to the results of the Mann-Whitney U test, there was no statistical relationship between the willingness to change and treatment adherence of the study participants and their work activity ( $p>0.05$ ).

According to the results of the Anova test, there is a statistically significant relationship between the number of children of the study participants and their willingness to change ( $p<0.05$ ). Thus, the study participants with 2 or more children are more willing to change than the study participants with 1 child and no children, and the study participants with 1 child are more willing to change than the study participants with no children.



**The main provisions of the dissertation are reflected in the following works of the author:**

1. Allahverdiyev, R.F. Psixoaktiv maddə qəbulunun insanda yaratdığı psixi və fiziki asılılıqların təhlili //Bakı Dövlət Universitetinin Psixologiya Jurnalı. - Bakı: -2016, №3, s. 22-29.
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The defense of the dissertation will be held on 30 May, 2025 at 14:00 at the meeting of the FD 2.43 Dissertation Council of the Higher Attestation Commission under the President of the Republic of Azerbaijan at Baku State University.

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The dissertation is available for review at the Baku State University library.

Digital copies of the dissertation and its abstract can be found on the official website of Baku State University. <http://bsu.edu.az>.

The abstract has been submitted to the required addresses 28 April 2025.

Signed for print: 15.04.2025

Paper format: 60x84 1/16

Volume: 40849.

Number of hard copies: 20