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Personality Changes, Risk Factors, Early Signs, and Parental Intervention in Preventing Substance Addiction Relapse Among Youths in the Southwest Region Cameroon

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ABSTRACT

Substance addiction relapse remains a measure problem among those in the recovery process, with over 85% of individuals reverting to previous substance use patterns within one-year post-treatment. While relapse rates may decrease after the initial 12 months, a 40% risk of relapse persists after two years of recovery and a 15% risk persists after five years. Every relapse is dangerous as it can lead to overdose. Understanding of the importance of early intervention in the prevention of substance addiction relapse in youths is of immerse value, this study set out to investigate: personality changes, risk factors, early signs, and parental intervention in preventing substance addiction relapse among youths in the Southwest Region Cameroon. A sample of 16 persons where interviewed, Data was analysed using the process of thematic analysis whereby concepts or ideas were grouped under umbrella terms or key words with the support of Atlas Ti 5.2 (Atlas Ti GMBH 2006). Findings revealed that, certain personality changes such as: increased aggression and anger, heightened risk-taking behaviour, impulsivity, increased desire for immediate gratification, decreased conscientiousness and more are associated to substance addiction. The findings further exposed social and environmental triggers which can activate relapse. On early signs to look out for, this study revealed that, mood swings, minimizing the consequences of past use, social isolation, secrecy, cravings for substance and planning to use drugs in a controlled manner, are some early signs of addiction relapse. However, findings also exposed that, even when parents identify these early signs of substance addiction relapse, some parents face significant challenges which obstructs their effective intervention. The above challenges notwithstanding, some parents presented evidence-based techniques which they have used overtime to prevent relapse in youths. These includes: building a backup relapse prevention plan, encourage self-care, form an intervention team, build effective communication to understand the root cause of addiction and decide on specific outcomes together, build a structured routine, be patient and supportive, repair broken relationship and instil discipline in youths, monitor and follow up their medical appointment, work in collaboration with mental health and substance addiction experts. Based on the findings, this study recommends parents and family members to work in collaboration with mental health and substance addiction experts, to explore the root cause of addiction, know warning signs to look out for, and to help youths build new coping skills to overcome substance cravings.

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INTRODUCTION

Substance addiction also known as substance use disorder or dependence is a biopsychological condition, which affects a person's brain and behaviour, leading to an inability to control the use of a legal or illegal drug despite harmful consequences (Zou et, al. 2017). In recent years, addiction of psychoactive substances among youths have become a global concern. Psychoactive substances are substance which affects a person's mood, mental processes and behaviour by altering their central nervous system. Some of these substances include; cannabis (marijuana), cocaine, fentanyl, alcohol, caffeine, nicotine, heroin, meth and certain painkillers.

Addiction to psychoactive substances often begin with an experimental use of a recreational drug in social situations with peers, or with prescribed medications such as opioid painkillers, to a more frequent usage. As substance use increases, the individual gradually becomes dependent on it to an extend that, an attempt to stop substance use may cause intense withdrawal symptoms such as; difficulty sleeping, increased heart rate, muscle aches, runny nose, chills, agitation, stomach pain etc

Globally, substance use disorders impose a significant health problem among adolescents and young adults aged 10–24 years. In 2021, an estimated 29.7 million individuals within this age group were affected by substance use disorders, primarily alcohol, cannabis, and opioid use disorders (Chen, et, al. 2025). Similarly, the Cameroon Human Rights Commission revealed that "21% of the school-age population have already experienced hard drugs; 10 % are regular users of which 60% are between 20 to 25 years old. The 15-year-olds are more concerned by this scourge with a 15% higher prevalence in schools" (Cameroon: 21% of school-age children use drugs (study). (27th June, 2022, 2022). Based on increased drug consumption of hard drugs and other substance, the prevalence rates of drug related disorders have risen from 18.83% to 31.82% (psychoses), 10.38% to 14.99% (depression) and 6.88 to 8.83% (drug use and consequences) between 2021 and 2024, with even greater increases in some regions, such as Centre, North-West, South-West, East and Littoral of Cameroon over the same period (Policy Brief, 2025).

The consequences of substance addiction are enormous, ranging from: possible transmission of HIV/AIDS and other sexually transmitted disease primarily through exposure to body fluids of an infected person during sexual contact or through sharing of unsterile drug-injection equipment; increased crime rate such as stealing, scamming and gambling in order to meet the high need for drugs; school dropout; broken social relationship; mental health problems such as depression, anxiety, developmental lags, laziness, social withdrawal, and other psychosocial dysfunctions frequently are associated to substance abuse among youths.

Although different stakeholders like the Government, Non-Governmental Organisations (NGOs), United Nation (UN) agencies, civil societies and others have put in measure to mitigate substance use among youths in Cameroon, addiction relapse remain a measure problem among those in the recovery process. Relapse in a general sense is a deterioration in health status after an improvement. In the realm of substance addiction, relapse is a return to using drugs, alcohol or other substance after a period of sobriety. Unfortunately, approximately 2/3 of individuals relapse within weeks of starting treatment and over 85% of individuals revert to previous substance use patterns within one-year post-treatment. While relapse rates may decrease after the initial 12 months, a 40% risk of drug relapse persists after two years of recovery and a 15% risk persists after five years (The Grove Estate, 2025). Specifically, alcohol relapse rates range from 40 % to 80 %, cigarette smoking relapse rates are approximately 50 %–70 %, and relapse rates for other drugs are estimated at 75 % (Adem et al, 2025). Hence overcoming addiction is not an immediate do-and-done victory, in reality it takes time. Lapses and relapse are common hurdle faced by many people in recovery.

Brain Changes Due to Substance/ Drug Use

Substance use interferes with brain functions by altering the way neurons send, receive, and process signals through neurotransmitters. Shortly after entering the body, drugs cause dramatic changes to synapses and affect the brain's pathways involving reward, by producing an intense euphoria. To bring stimulation down to a more manageable level, the brain tries to adapt by reduce the number of dopamine receptors at the synapse. The sending neurons increase their number of dopamine transporters more quickly, clearing dopamine from the synapse. The large flows of dopamine "teach" the brain to seek drugs/substance at the expense of other, healthier goals and activities, thus, decreases the brain's response to natural rewards (Learn. Genetics, 2025).

As substance misuse continue, the brain becomes more resistant to dopamine and develop tolerance, trying to account for the excess that is produced when using drugs.

Overtime, regions outside of the reward pathway of the brain are also affected. Over time, brain regions responsible for judgment, decision-making, learning, and memory begin to physically change, making drug seeking driven by habit, almost reflex and by not conscious or rational decisions. These brain changes endure long after an individual stops using substances. Some drugs have toxic effects that can kill neurons and most of these cells will not be replaced. And while changes to connections between neurons in the brain may not be permanent, some last for months and even years after substance use, making it challenging for addicts to stay drug-free. They often experience intense cravings for the substance, leading to relapse. (Learn. Genetics, 2025).

Stages of Relapse

Relapse happens when a person stops maintaining their goal of avoiding the use of drugs and other substance and returns to their previous habit of substance use. After the treatment of substance addiction, relapse is a major problem for many. Relapse generally occur in three distinct stages which gets worse over time. These stages include: emotional, mental and physical relapse.

Relapse Stage 1: Emotional Relapse

Emotional relapse begins far before someone in the recovery journey physically return to substance use. It often begins with emotional struggles which may not be conscious to the individual. It may occur when exposed to triggers that can cause the individual to become less emotionally stable and prone to mood swings or distress and subconsciously the individual may begin to desire an exit for their emotional pain.

Some warning signs of emotional relapse include; bottling up emotions, not going to recovery support group meetings, isolating oneself from peers and family, poor eating and sleeping habits, going to support meetings but not sharing, focusing on other people and their problems to avoid your own, intolerance, defensiveness, mood swings, not asking for help, poor self-care emotionally or physically, not managing anxiety, anger, or other emotional problems in a healthy way and not having sober fun or taking time for oneself (Parisi, 2025)

Relapse Stage 2: Mental Relapse

Mental relapse usually follows after an emotional relapse. During this stage, the patient becomes aware of their internal struggle between the desire to resume using substance and the desire to remain abstinent. Fantasizing about substance use is common during mental relapse, and the individual may convince him/herself that it “wouldn’t be so bad” if they returned to substance use. As individuals go deeper into the mental relapse stage, their cognitive resistance to relapse diminishes and their need of escape increases (Parisi, 2025).

Warning signs of a mental relapse include: craving a substance, thinking about people/places/things associated with their use in the past, exaggerating the positive aspects of past use and/or minimizing the consequences of past use, lying, bargaining, trying to plan ways to use while still maintaining control, seeking opportunities to relapse, and planning a relapse (Guenzel & McChargue, 2023).

Relapse Stage 3: Physical Relapse

Physical relapse is the final stage of relapse, it occurs when an individual resumes the use of the substance. Some researchers have differentiated it into; a "lapse" (an initial use of the substance) and a "relapse" (uncontrolled use of the substance) (Guenzel & McChargue). When a person is headed towards relapse, certain signs or changes in behaviour can appear during the emotional and mental stage, without taking any affirmative action, it is only a matter of time before relapse physically. Some warning signs for physical relapse include: idealizing past drug or alcohol use, appearing hungover, experiencing withdrawal if they can’t obtain more drugs, coordination and cognitive issues, doubting the recovery process, withdrawing from loved ones and appearing intoxicated

Every relapse is dangerous as it has a negative impact on mental health and the risk of overdose on the individual. Re-consumption of substance just once after a period of sobriety can result into intense cravings to continue use, and the potential to enter back into consistent substance use is prevalent. However, experiencing relapse is not a sign of failure or an inability to recover. It may be an indication that the person needs stronger support system, treatment modification plan, or a modification in coping skills. Often, when a person is headed toward a relapse, signs or changes in behaviour can appear well before the actual relapse. With the help of a person’s recovery community, these signs can be identified and worked through before relapse occurs (Shalenko, 2025). Looking at the family as an immediate community, this research seeks to understand personality changes, early signs, risk factors and how parents can intervene in preventing substance addiction relapse among youths.

Specific Research Objectives

Specifically, this study seeks to:

- Understand personality changes among youths struggling with substance addiction in the South West Region of Cameroon
- Examine risk factors associated with substance addiction and relapse among youths struggling with substance addiction in the South West Region of Cameroon
- Find out some early signs of relapse among youths struggling with addiction after rehabilitation in the South West Region of Cameroon
- Understand how parents can intervene in order to prevent relapse among youths in recovery from substance addiction in the South West Region of Cameroon

RESEARCH METHODOLOGY

This study employed a qualitative research method, with a case study research design. A sample of 16 persons where interviewed, and the sample was broken-down as follows: purposively, 5 parents with youths who have recovered from substance addiction for a minimum period of two years were interviewed on personality changes among youths in addiction and the parental intervention techniques they have been using

to prevent relapse over time. 5 parents with youths who relapsed within two months after rehabilitation and treatment were also interviewed on personality changes among youths in substance addiction and the challenges they faced as parents in the intervention process to maintain sobriety. Finally, 6 youths who relapsed in substance addiction within one year after treatment were also interviewed on their, personality changes, early signs and risk factors to substance addiction relapse. Data was analysed using the process of thematic analysis whereby concepts or ideas were grouped under umbrella terms or key words with the support of Atlas Ti 5.2 (Atlas Ti GMBH 2006). Analysis was done using the Atlas.ti version 5.2 which is a powerful workbench for the qualitative analysis of large bodies of textual, graphical, audio, and video data.

FINDINGS

The result was presented in response to the research question, with a sub-conclusion for each of the specific research question

Research Question One: What are the Personality Changes among Youths Struggling with Substance Addiction in the South West Region of Cameroon?

Parents revealed that, there are certain personality changes they have observed in their children, which are associated with substance addiction. Some of these personality changes include: increased aggression and anger, heightened risk-taking behaviour, acting impulsively, increased desire for immediate gratification, self-centredness, poor attention, restlessness, isolation from family members and love once, deception, heightened emotional instability, increased secrecy**,** decreased conscientiousness and difficulty in accepting responsibility. These concepts were depicted from their words quoted as follows:

> *"My son gets unnecessarily angry when we try to correct him or talk about his addiction behaviour at home." "It is very easy for her to engage in physical aggression with the younger once at home." "I noticed he has relapsed because, he became very violent at home." "Substance use becomes his top priority and he can steal just to have money for drugs" "When she takes drugs, she engages in more reckless behaviours and act without thinking of the consequences of her behaviour." "She responds to situations without reflection." "He wants immediate satisfaction and acts like a child" "He is just concern on how things will benefit him, not thinking of others." "She can not stay focused and complete a task." "He losses concentration during communication." "He acts impatiently, can not stay in a place for long." "Always feeling agitated" "He isolates himself from us." "He does not feel comfortable to be among people." "He can lie just to get money for drugs" "I can't trust her words." "He has emotional problems." "I will notice he has taken drugs because of the emotional swings." "He becomes very secretive, in order for us not to know what he does." "He lacks the ability to plan his day or to even focused on what is a priority." "He does not accept responsibility for his actions." "He does not see any problem with his poor behaviour, but always try to blame others."*

Research Question Two: What are Some Risk Factors Associated with Substance Addiction and Relapse among Youths Struggling with Substance Addiction in the South West Region of Cameroon?

Findings revealed that, some risk factors of substance addiction relapse include: peer pressure, poor coping skills, exposure to social and environmental triggers, over-confidence in recovery process, failing to understand the complexity of substance addiction, poor decision making, stress, negative emotions, interpersonal problems, social isolation, poor social support and mental health problems. The above risk factors associated with substance addiction and relapse are depicted from the words of respondents quoted as follows:

> *"I did not separate myself from the same friends who took me into drugs." "My friend encouraged me." "I followed my friends." "I could not control myself among friends." "I tried to abstain from drugs for some time, but poor self control caused me to go back." "Being in the same environment where drug is consumed." "Spending time with people together with whom you used to consume drugs together." "I was so confident about myself, thinking I am cured and do not need to worry about drugs and triggers." "It took me time to understand that addiction has destroyed many different areas of my life, which I also need to fix." "I made certain decisions which were so bad." "I could not make positive decisions concerning drugs." "I was going through different family problems which caused to be so stressed." "I went back to drugs due family problems." "Very few friends and family members could spear out time to listen to me." "I was always lonely." "The conflict within my family lead to sadness and frustration, with no one to share my emotions with when I started experiencing cravings." "I am also suffering from depression, and it is sometimes difficult to control myself."*

Research Question Three: What are some Early Signs of Relapse among Youths Struggling with Addiction after Rehabilitation in the South West Region of Cameroon?

Findings revealed that, some early signs of relapse include: mood swings, minimizing the consequences of past use, isolating self from others, poor sleep schedule, exaggerating the positive aspects of past use, unhealthy eating habits, secrecy, poor self-care, cravings for substance and planning to use drugs in a controlled manner, weight loss or weight gain and avoidance of social activities.

The above early signs for relapse can be seen in their words quoted as follows:

> *"The desire for drugs changes my mood." "I started fantasizing about substance use long before relapsed physically." "The feelings of drug consumption, made me to go back to it." "When controlled by the desire for drugs, I will just stay away from people." "I will prefer to be alone." "It alters my sleep." "It becomes difficult to sleep." "Within me, the thoughts of the benefits of substance use will be uncontrollable." "Cravings for drugs made me focused positive aspects of it." "It is difficult to eat regularly." "I loss appetite for certain food." "Because I do not want my family members to understand what is happening, I become very secretive." "I try to live a private life." "Drug consumption makes it difficult for me to take my bath regularly." "During the period of abstinence, the intense desire of cravings for drugs caused me to relapse." "I could not control my cravings for a long time." "Because of the desire for drugs, I started thinking of how I can use drugs without getting addicted to it." "I notice he has gone back to drugs because of the rapid weight loss." "He will cut down within a very short period." "He will avoid social interactions" "She does not want to take part any social activity."*

Research Question Four: How can Parents Intervene in Order to Prevent Relapse among Youths in Recovery from Substance Addiction in the South West Region of Cameroon?

In responding to the above research question, we first looked at the challenges of parents whose youths relapsed within two months after relapse and the intervention techniques of parents whose youths have stayed sober for three years and above after rehabilitation.

What are some of the Challenges Obstructing Effective Parental Intervention in Preventing Substance Addiction Relapse among Youths?

Findings revealed enormous challenges faced by parents to effectively manage youths struggling substance addiction. These challenges include: arrogance and lack of respect from youths in addiction, manipulative behaviour and lies telling, parents busy schedule and lack of time to monitor progress, youths' refusal to separate from bad friends, secrecy and unwillingness to help others understand their situation, parents' not being skilful to help the youth develop coping strategies and a positive mindset.

The above challenges are expressed in the words of the respondents as quoted below:

> *"My son is very arrogant and lack respect for any one in the house. He goes out even without the consent of anyone." "She is disrespectful, and this makes it difficult for us to communicate about her challenges as she struggles to recovery from substance addiction." "She can manipulate you for her selfish reasons" "He lies a lot, and it gets me confused and frustrated." "He lies a lot, so I do not really understand him." "My career is very demanding, and I have little or no time to monitor his progress." "No matter how much effort I have put in, he is still going back to the same friends who took him to drugs." "In order to cover for her drug use, she is too secretive. This makes it difficult to intervene." "He does not want to share his challenges with anyone." "I do not know how to help him develop new habits." "I don't know how to help him develop a positive mindset."*

What are Some Intervention Techniques Used by Parents to Prevent Substance Addiction Relapse in the South West Region of Cameroon

Parents whose youths have recovered from substance addiction for a period of at least two years revealed some intervention techniques which they have been using to support addiction recovery. These techniques include: building a backup relapse prevention plan, encourage self-care, form the intervention team, focus on effective communication, build a structured routine, decide on specific outcomes together, be patient and supportive, rebuilding broken relationship, monitor and follow up progress, work with experts and engage in family therapy. The above intervention techniques are supported by their words quoted below:

> *"As a family, we developed a backup relapse prevention plan, which facilitated timely interventions even when we suspect any form of relapse." "We monitor his every move, to ensure he is not going back." "We monitor for behavioural changes daily." "We provide continuous encouragement on the need for self-care" "I join other parents going through similar situation, and we for a team to help each other." "We share and benefit from each other in a team." "I try my best to communicate with him." "Together we talk about his daily challenges" "We talk about his cravings and try to overcome it together." "I introduced a daily routine to keep her busy and remove her mind from the thoughts of drugs." "Together, we talk about the outcomes of particular drug related behaviours." "This condition has taught to be patient and supportive towards my son." "We have done family reconciliation." "We have*

repaired broken relationships within the family." "I try to monitor their daily activities." "I ensure that I follow up, to ensure that he takes his medications and respect hospital appointments." "I follow up, to be sure that he does not fall back." "I work in close collaboration with mental health and addiction experts." "We have engaged in family therapy."

DISCUSSION OF FINDINGS AND RECOMMENDATIONS

Relapse is a significant problem in substance addiction recovery journey. Substance misuse causes significant changes in the brain, making it difficult to return to a pre-addiction state even when substance is stopped for sometime, thus increasing the risk of relapse even after intensive treatment. Relapse can be very dangerous and even deadly, if a person uses as much substance as they did before withdrawal, as this can lead to an overdose and further complications because the body is no longer adapted to its previous level of substance exposure. While the individual going through relapse may experience feelings of guilt, frustration, and shame, the parents and love ones are generally disappointed, angry, and experience feelings of helplessness. Substance addiction is often misunderstood to be easy, and a do-and-done problem. We usually expect our love ones to stop substance use immediately after treatment. Unfortunately, this is not usually the case. On the contrary overcoming addiction is a multifaceted journey, which does not involve only physical withdrawal from substance, but also significant emotional and mental transformation. With an understanding that early intervention in emotional and mental relapse is crucial to prevent physical relapse this study uncovered personality changes, risk factors, early signs and parental intervention in preventing substance addiction relapse among youths in the Southwest Region Cameroon.

From the findings it was revealed that, certain personality changes associated with substance addiction include; increased aggression and anger, heightened risk-taking behaviour, acting impulsively, increased desire for immediate gratification, self-centredness, poor attention, restlessness, isolation from family members and love once, deception, heightened emotional instability, increased secrecy, decreased conscientiousness and difficulty in accepting responsibility. The study further revealed that, relapse among youths can be triggered by certain risk factors, which include: peer pressure, poor coping skills, exposure to social and environmental triggers which reminds them of the euphoria of past drug experience, over-confidence about the recovery process, failing to understand the complexity of substance addiction, poor decision making, stress, negative emotions, interpersonal problems and stress, social isolation, poor social support and mental health problems.

To facilitate interventions, this study equally uncovered some early signs of substance addiction relapse which include: mood swings, minimizing the consequences of past use, isolating self from others, poor sleep schedule, exaggerating the positive aspects of past use, unhealthy eating habits, secrecy, poor self-care, cravings for substance and planning to use drugs in a controlled manner, weight loss or weight gain and avoidance of social activities.

Benefiting from these findings is the fact that, even when parents identify these early signs of substance addiction relapse, they face significant challenges which obstructs their effective intervention in the prevention of relapse among youths.

These challenges include: arrogance and lack of respect from youths in addiction, manipulative behaviour and lies telling, parents busy schedule and lack of time to monitor progress, youths' refusal to separate from bad friends, secrecy and unwillingness to help others understand their situation, parents' not being skilful to help the youth develop coping strategies and a positive mindset. The above challenges notwithstanding, the study also revealed that, some techniques for effective parental intervention to prevent substance addiction relapse among youths include: building a backup relapse prevention plan, encourage self-care, form the intervention team, focus on effective communication to understand the root cause of addiction and decide on specific outcomes together, build a structured routine to keep youth busy, be patient and supportive towards youth struggling with addiction, rebuilding broken relationship and instil discipline in youths, monitor and follow up their medication, work in collaboration with mental health and substance addiction experts.

Recommendations

Based on the findings of this study, the following recommendations are made:

Parents and family members should be vigilant to notice certain personality changes such as: aggression and anger, heightened risk-taking behaviour, acting impulsively, increased desire for immediate gratification, self-centredness, poor attention, restlessness, social isolation, deception, heightened emotional instability, increased secrecy and decreased conscientiousness among youths. These behaviours are prone to lapse and relapse, and if the right intervention is provided on time, relapse can be prevented

Parents and love ones should understand that, there are certain environmental and social factors which can increase their risks of relapse. Such risk factors to addiction relapse include; stress, increased family problems, social isolation and poor social support. Thus, youths going through substance addiction recovery need a multidimensional approach for intervention

Parents and love ones should know, that relapse often begins with mood swings and thoughts minimizing the consequences of past substance use. Relapse begins with emotional and mental relapse before the individual starts to physically use substance again. A high-risk situation that is followed by a poor coping response. Therefore, love ones should watch out for early signs of the emotional and mental relapse, in order to prevent physical relapse

Finally, for effective parental intervention in order prevent substance addiction relapse among youths, parents should work in collaboration with mental health and substance addiction experts, to explore the root cause of addiction, know the warning signs to look out for, and to help youths build new coping skills to overcome substance cravings. Parents should equally put in place an emergency relapse intervention plan, work on the family functioning, improve family cohesion, and decrease conflict in order to create a more supportive environment for recovery.

CONCLUSION

Personality is a relatively stable pattern of behaviour, thoughts, feelings and emotions which distinguishes an individual from others. Unfortunately, substance misuse affects the brain profoundly, causing the individual to develop dependency on substance and engage in compulsive and uncontrollable use of substance at the detriment of self and others. Substance addiction primarily affects three interconnected regions of the brain that make up the reward, stress, and executive function circuits, thus, negatively influences how addicts interact with the world around them. Parental intervention is crucial for youth addiction recovery because, the journey of addiction recovery is not as straightforward as it may seem. Youth substance addiction is a multifaceted problem, requiring a multidisciplinary and comprehensive approach to address the root causes of the problem effectively. Effective parental intervention involves parents working in collaboration with mental health and substance addiction experts, strengthens the family unity, improves communication to understand the root cause of youth addiction, monitor and enhances treatment engagement, follow-up and help youth develop coping skills to increase long-term success rates.

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