Drug Addiction As A Nature Or Nurture

Nature alludes to the entirety of the qualities and inherited elements that impact what our identity is, from our physical appearance to our character attributes. Nurture can be defined as all the environmental factors that sway who we are, including our youth encounters, how we were raised, our social connections, and our encompassing society. Some philosophers, for example, Plato and Descartes recommended certain things are intrinsic, or that they happen normally paying little mind to environmental impacts. According to the NIH, drug addiction is “a chronic, relapsing disorder characterized by compulsive drug seeking, continued use despite harmful consequences, and long-lasting changes in the brain. It is considered both a complex brain disorder and a mental illness. The NCI Dictionary of Cancer Terms defines drug abuse as 'the use of illegal drugs or the use of prescription or over-the-counter drugs for purposes other than those for which they are meant to be used, or in large amounts.' Drug abuse may prompt social, physical, enthusiastic, and work-related issues.

Does a dependence start because of a sign from the genes? Or on the other hand, does a habit start because of something an individual experience in their environment? These are the questions I will be dealing with. In this paper, I will explain how drug addiction is classified as a disease and how it's used for recreation only. First, let's talk about what addiction is and how it can be hereditary. Some people are born biologically wired to be addicts says Addiction Research and Theory. Having an addictive personality attributes to this because some people can't help liking certain things. Their brain works differently and tells them 'just one more time' or 'you'll stop eventually just not right now.' However, heating the mind-boggling issue of addiction down to a personality type can be destructive for a few reasons. One is that it can lead individuals to erroneously accept they aren't in danger since they don't have the 'right personality' for addiction. It might also make individuals who have an addiction believe that they're not able to recoup if addiction is 'hardwired' into what their identity is. Addictions are decent to profoundly heritable. Family, appropriation, and twin investigations uncover that a person's hazard will, in general, be corresponding to the level of genetic relationship to a dependent family member. Heritability’s addictive issue extends from 0.39 for drugs to 0.72 for cocaine. The Virginia Twin Study uncovered that in early pre-adulthood the commencement and utilization of nicotine, liquor, and cannabis are all the more firmly dictated by familial and social components, however, this bit by bit decrease in significance during the movement to youthful and centre adulthood, when the impacts of hereditary elements become maximal, declining fairly with ageing.

According to Drug Addiction: The neurobiology of behaviour gone awry; drug addiction can be seen in the brain. The brain of an addict looks much different than the brain of a clean sober person. Drug use is not just something that is learned and repeated, it is a habit that becomes necessary in the individual’s life. Withdrawal is mental and physical, which makes the addict keep doing drugs because the pain of withdrawal is terrible. Going with withdrawal is hard because that person knows exactly what will take that pain away so it convinces them to give up detoxing. The abnormal social appearances that happen during addiction have been seen by numerous individuals as 'decisions' of the dependent individual, yet ongoing imaging contemplates have uncovered a fundamental disturbance to brain areas that are significant for the ordinary procedures of inspiration, reward and inhibitory control independent people. This

gives the premise to an alternate view, that illicit drug use is a sickness of the brain, and the related unusual conduct is the consequence of brokenness of brain tissue, similarly as a cardiovascular deficiency is an illness of the heart and irregular blood course is the aftereffect of dysfunction of myocardial tissue.

Addicts can be clean for years and relapse as soon as they have one thought about using. They aren't relapsing to cure the physical withdrawal symptoms because those are gone, they are relapsing because they thought about getting high and went and did it. Getting high has such strong control over the brain that nothing else in that individual's life matters except drugs. Michael Lyvers journal titled 'Drug addiction as a physical disease: The role of physical dependence and other chronic drug-induced neurophysiological changes in compulsive drug self-administration' makes a good point of addiction is chronic. Which helps back up the reason addicts’ relapse after so many years of being clean. In the same article, the withdrawal-relief paradigm, or opiate model of addiction is analyzed in the light of recent test and clinical proof for different addictive medications. It is inferred that despite the opiate model, the star grouping of neurotic practices characterizing addiction (impulsive medication use, wanting, loss of control, and a constant inclination to backslide) doesn't essentially mirror a need to assuage real or adapted autonomic withdrawal side effects. Now, we are going to transition into the nurture of drug addiction.

Watching family and friends use drugs can make it convincing that it's safe, because why would they do something harmful? Recreational drug use is common among younger aged kids. Smoking weed is usually recreational whether it is at a party, before class, to help alleviate pain, etc. Guardians who drink before their kids could be sustaining enslavement in those kids regardless of whether they never expected to do as such. The organization Drinkaware says that there is a solid connection between beginning stage drinking and a kid's presentation to savouring the home. It may be the case that adolescents see their folks drinking frequently and become persuaded that the action is innocuous and fun, or it may be the case that teenagers with drinking guardians have simple access to liquor. Despite the explanation, guardians who drink could cause a sustain based enslavement trigger. Research has demonstrated that kids who are raised by guardians adopting the authoritative model of parenting will, in general, be more effective than their companions, when estimated for mental self-view and substance misuse. The key explanation the definitive style so viable is because youngsters who experience childhood in that structure learn significant ways to deal with critical thinking, and how to direct and communicate their feelings, to where they can create aptitudes and procedures against the destructive idea designs that regularly precede substance misuse. In this way, a nurturing environment could offset the nature of the genetic component of addiction.

Peer pressure can be a staggering and practically unavoidable piece of growing up. It's hard for a ton of children to push back against companions, and as an individual arrives at pre-adulthood a feeling of innate network turns out to be very nearly a formative goal, or possibly a crucial right of the section. Subsequently, it turns out to be much progressively hard for somebody to 'simply state no' as a juvenile than it will be as the youngster develops into a youthful grown-up. A child will pick what appears to be a holding involvement in a dear companion over practical insight as a rule.

People diagnosed with diseases that cause a lot of pain are given a medical card. They smoke instead of taking pain killers. This is a learned behaviour of drug use; they aren't smoking because their brain is telling them to. They are doing this to help the pain they are in from

something else. For instance, a few people experience a form of trauma while growing up. They live in disorderly family units in which they feel as if they are in peril most or constantly. They are stressed, concerned, and dreadful, and they carry those sentiments with them into adulthood. The National Child Traumatic Stress Network says that one child in four in the United States encounters something like this as they develop, and these children have higher paces of substance use and misuse. They utilize these substances as a type of self-prescription, and in time, they could create physical and mental reliance issues on those substances. This is a support issue. These youngsters don't create addictions because of their qualities. They are creating addictions because of an encounter they have suffered and endured. Their qualities don't assume a job here.

As opposed to accusing either nature or nurture, specialists propose that addictions will in general spring up through a confounded interaction of the two qualities and condition. Having only one kind of hazard factor can be risky, yet the individuals who have factors that could fall into the two camps may have such an exceptional danger of harm that no one but treatment can assist with switching things around. The vast majority who have addictions build up those issues because of exchange among nature and support. They may not plan to build up a fixation, however, their qualities may start habit's pleasure. Their condition may make a habit simpler to continue than it maybe was there an alternate sustaining condition around that individual.

An individual with a hereditary affinity to like liquor may appreciate that absolute first taste, however, if the individual lives with a consumer, that debut drink may be all the more prone to occur. The two kinds of factors expand upon each other and reinforce each other, making undeniable enslavement all the more conceivable. Those equivalent interlacing components could be vital to recovery. People who get help for addiction may get medications (for the nature issue) and therapy (for the nurture issue).

References

1. Agrawal, A., Verweij, K. J., Gillespie, N. A., Heath, A. C., Lessov-Schlaggar, C. N., Martin, N. G., … Lynskey, M. T. (2012). The genetics of addiction-a translational perspective. Translational psychiatry, 2(7), e140. doi:10.1038/tp.2012.54
    - This article has great evidence on the heritability of drug use. It is shown in early stages and in adolescence. Twin studies have been performed which show abuse for drugs and alcohol, even though I am only focusing on drugs. It is a great article explaining that genes do play a role. Also, that addiction is a disease and is chronic. There a couple genes that are proved to be linked to heritability of drug use, but it is hard to pinpoint other ones.
2. Braun, K., & Champagne, F. A. (2014). Paternal Influences on Offspring Development: Behavioural and Epigenetic Pathways. Journal of Neuroendocrinology, 26(10), 697–706. https://doi.org/10.1111/jne.12174
3. Even though this study was performed on rats, it still makes some good points about epigenetics and paternal influences. Epigenetics is when a gene is turned on or off. A father can have a genetic influence on an offspring without directly touching them. This article helps to prove that if a father is an addict, he can pass down those certain genes and if they are turned on then the offspring will show them. Crabbe, J. C. (2002). Genetic Contributions to Addiction. Annual Review of Psychology, 53(1), 435. https://doi.org/10.1146/annurev.psych.53.100901.135142

    - Genes play a role in behavior which makes addiction both mental and physical. In this journal, drugs were given to mice and the effects them were observed and mapped out on their genes. The locus of their specific genes is very similar to ours, so the mice were used to help scientists find the specific genes in humans
4. Larkin, M., Wood, R. T. A., & Griffiths, M. D. (2006). Towards addiction as relationship. Addiction Research & Theory, 14(3), 207–215. https://doi.org/10.1080/16066350500151747
    1. This article states that some individuals are “biologically wired.” This means that some people are destined to be addicts, they were born like that. Having an addictive personality makes you vulnerable to try new things and end up liking them, so when an individual tries a drug and likes it, they become addicted. This article helps support that addiction is a disease because it’s a chronic lifestyle
5. Lyvers, M. (1998). Drug addiction as a physical disease: The role of physical dependence and other chronic drug-induced neurophysiological changes in compulsive drug self-administration. Experimental and Clinical Psychopharmacology, 6(1), 107–125. https://doi.org/10.1037/1064-1297.6.1.107
    - This article makes a good statement about recovering addicts relapsing after a year of being clean. The physical withdrawal symptoms are gone so they aren’t using to get rid of them. They use because of the impact it has on their brain. They return home after programs and use because the environment they are in reminds them of the memories. It’s become a lifestyle for them, all their brain can focus on is using. This helps my argument that addiction turns into a disease, it is chronic, even after years of being clean your brain still thinks about getting high
6. Sadava, S. W., & Forsyth, R. (1976). Drug Use and a Social Psychology of Change. Journal of Addiction (to Alcohol & Other Drugs), 71(4), 335–342. https://doi.org/10.1111/j.1360-0443.1976.tb00104.x
7. This article gives information about a study that was done to see the effects of negative and positive conditions that affect drug use. Using drugs can be a stimulant to help get through social situations, hard times, parties, etc. Drug addiction can be caused by having an addictive personality, you get attached to things easily and you keep doing them. I will use this article to back up my argument that drug use is not just recreational, it becomes something you need mentally
8. Swedish study shows heritability for drug abuse, especially in males. (2013). Brown University Child & Adolescent Psychopharmacology Update, 15(12).
    - This article is great for examples of both sides of the argument. Drug use is found to be both environmental and hereditary. Through twin studies, it is shown that drug use still occurs even when spilt up in different households. The community you live in plays a role but is also proven to run in genes. Genetic influences are greater than environmental ones.
9. Volkow, N. D., & Ting-Kai Li. (2004). Science and Society: Drug addiction: the neurobiology of behaviour gone awry. Nature Reviews Neuroscience, 5(12), 963–970. https://doi.org/10.1038/nrn1539
    - This article gives evidence of brain scans that show drug addiction. These scans are showing that drug addiction is a brain disease and not just something is learned and repeated. Not only is it in the brain but it effects the heart and the rest of the body. When dopamine levels drop the individual needs that “pick up”, so they chase the high to feel better.
10. Winger, G., Woods, J. H., Galuska, C. M., & Wade-Galuska, T. (2005). Behavioral

perspectives on the neuroscience of drug addiction. Journal of the experimental analysis of behavior, 84(3), 667–681. doi:10.1901/jeab.2005.101-04

11. This article talks about the neuroscience of drug addiction on the brain. Drugs can affect the way neurotransmitters act through their membrane. This can also influence the way DNA and RNA is transcribed and translated. If DNA or RNA is transcribed or translated wrong, then it will alter the gene/protein that is trying to be made. If a gene is altered in one person and the passed down to their offspring, they are going to have the altered gene and not the original gene.