

# БИОМЕДИЦИНА ВА АМАЛИЁТ ЖУРНАЛИ

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**FACTORS INFLUENCING THE EFFECTIVENESS OF MEDICAL AND SOCIAL  
REHABILITATION IN PATIENTS WITH CHEMICAL ADDICTIVE DISORDERS  
(LITERATURE REVIEW)**

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**ANNOTATION**

Chemical addictive disorders are currently recognized as one of the most pressing medical and social issues in global healthcare. Psychoactive substance dependence adversely affects not only the physical and mental health of individuals but also their ability to reintegrate into social life. The success of the comprehensive rehabilitation process depends on numerous factors, among which the presence and intensity of risk factors play a crucial role. Analysis based on various scientific sources reveals that biological, psychological, social, and environmental factors significantly influence the effectiveness of the rehabilitation process. In particular, genetic predisposition, early exposure to substance use, psychological instability, family neglect, and lack of social support are among the key contributors that increase the risk of relapse.

**Keywords:** Chemical addictive disorders, psychoactive substance dependence, risk factors, medical and social rehabilitation, risk of relapse.

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**KIMYOVIIY ADDIKTIV BUZILISHLAR MAVJUD BO'LGAN BEMORLARDA TIBBIY-  
IJTIMOIY REABILITATSIYASI SAMARADORLIGIGA TA'SIR KO'RSATUVCHI XAVF  
OMILLAR (ADABIYOTLAR SHARHI)**

## ANNOTATSIYA

Kimyoviy addiktiv buzilishlar bugungi kunda global sog'liqni saqlash sohasining eng dolzarb tibbiy-ijtimoiy muammolardan biri sifatida e'tirof etilmoqda. Psixoaktiv moddalarga qaramlik inson organizmining nafaqat jismoniy va ruhiy salomatligiga, balki uning ijtimoiy hayotga moslashuvi darajasiga ham salbiy ta'sir ko'rsatadi. Kompleks rehabilitatsiya jarayonining muvaffaqiyatlilik darajasi ko'plab omillar bilan bog'liq bo'lib, ayniqsa xavf omillarining mavjudligi va ularning intensivligi muhim rol o'ynaydi. Turli manbalardagi ilmiy ma'lumotlar asosida olib borilgan tahlillar shuni ko'rsatadiki, biologik, psixologik, ijtimoiy va ekologik omillar ushbu rehabilitatsiya jarayonining samaradorligiga sezilarli darajada ta'sir qiladi. Jumladan, genetik moyillik, erta yoshda boshlangan qabul tajribasi, ruhiy nomutanosibliklar, oilaviy befarqlik va ijtimoiy ko'mak yetishmovchiligi retsidiv xavfini oshiruvchi muhim omillar qatoriga kiradi.

**Kalit so'zlar:** kimyoviy addiktiv buzilishlar, psixoaktiv moddalarga qaramlik, xavf omillari, tibbiy-ijtimoiy rehabilitatsiya, retsidiv xavfi.

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**ФАКТОРЫ РИСКА, ВЛИЯЮЩИЕ НА ЭФФЕКТИВНОСТЬ МЕДИЦИНСКО-СОЦИАЛЬНОЙ РЕАБИЛИТАЦИИ У ПАЦИЕНТОВ С ХИМИЧЕСКИМИ АДДИКТИВНЫМИ РАССТРОЙСТВАМИ (ОБЗОР ЛИТЕРАТУРЫ)**

## АННОТАЦИЯ

Химические аддиктивные расстройства в настоящее время признаются одной из самых актуальных медицинско-социальных проблем в глобальном здравоохранении. Зависимость от психоактивных веществ оказывает негативное влияние не только на физическое и психическое здоровье человека, но и на уровень его социальной адаптации. Успешность комплексного процесса реабилитации зависит от множества факторов, при этом особую роль играют наличие факторов риска и степень их выраженности. Анализ научных данных из различных источников показывает, что биологические, психологические, социальные и экологические факторы существенно влияют на эффективность процесса реабилитации. В частности, генетическая предрасположенность, ранний опыт употребления, психические дисфункции, семейное равнодушие и недостаточная социальная поддержка относятся к числу значимых факторов, повышающих риск рецидива.

**Ключевые слова:** химическое аддиктивное расстройство, зависимость от психоактивных веществ, факторы риска, медико-социальная реабилитация, риск рецидива.

**Kirish.** Psixoaktiv moddalarga qaramlik bugungi kunda global jahon miqyosda inson salomatligi va ijtimoiy barqarorligiga jiddiy tahdid solayotgan muhim tibbiy-ijtimoiy muammolardan biri sifatida e'tirof etilmoqda. Ushbu holat nafaqat alohida shaxsning jismoniy va ruhiy holatiga, balki butun jamiyatga, uning iqtisodiy, ijtimoiy va madaniy tizimlariga ham salbiy ta'sir ko'rsatadi. Oxirgi o'n yilliklar davomida kimyoviy addiktiv buzilishlar psixoaktiv moddalarni suiiste'mol qilish holatlari nafaqat rivojlangan davlatlarda, balki rivojlanayotgan mintaqalarda ham keskin ortib bormoqda [7,9].

Jahon sog'liqni saqlash tashkiloti tomonidan taqdim etilgan so'nggi statistik ma'lumotlarga ko'ra, dunyo bo'yicha 35 yoshgacha bo'lgan har 20 nafar kishidan kamida bir nafari hayoti davomida biror turdagi psixoaktiv modda - bu alkogol, opioidlar, kannabinoidlar, psixostimulyatorlar yoki boshqa markaziy asab tizimiga ta'sir qiluvchi moddalardan foydalanishni boshlagan. Ulardan taxminan 13-15 foizida esa ushbu holat surunkali qaramlik ravishda suiiste'mol qilish shaklida

o'tgan, bu esa murakkab psixofiziologik buzilishlar, jamiyatdan yakkalanish, jinoyatchilikning rivojlanishi va nogironlik holatlari xavfini oshishiga olib keladi [3,6,11].

Adabiyotlarda keltirilgan turli mintaqaviy ko'rsatkichlar ham bu muammoning qamrovi keng ekanligini tasdiqlaydi. Masalan, Yevropa mamlakatlarida psixoaktiv moddalarga qaramlik darajasi umumiy aholi orasida 18-20 foizni tashkil etsa, AQShda ushbu ko'rsatkich 22 foizgacha yetadi. Bunday o'sish dinamikasi ayniqsa yoshlar va o'smirlar orasida sezilarli darajada yuqori bo'lib, ular orasida psixoaktiv moddalarni erta sinab ko'rish holatlari va shundan kelib chiqadigan ruhiy va somatik asoratlar ko'p uchramoqda [1,8].

O'zbekiston Respublikasida ushbu muammo bo'yicha rasmiy statistik ma'lumotlar yetarlicha keng yoritilmagan bo'lsa-da, sog'liqni saqlash muassasalari, psixiatrik va narkologik dispanserlar tomonidan olib borilgan kuzatuvlar psixoaktiv moddalarga qaramlik holatlari soni yildan-yilga ortayotganini ko'rsatmoqda. Xususan, so'nggi yillarda qaramlikning yoshga doir chegarasi pasayib borayotgani, ya'ni 16-18 yoshdagi bemorlar sonining ko'paygani alohida xavotir uyg'otmoqda [3,5,12].

Kimyoviy addiktiv buzilishlar yani psixoaktiv moddalarga qaramlik o'z navbatida chuqur psixologik va psixiatrik muammolarni yuzaga chiqaradi. Jumladan, xavotirli va depressiv buzilish holatlari, impulsiv harakatlarni nazorat qilishdagi buzilishlar, shuningdek, shaxsiyat buzilishlari tez-tez uchrab turadi. Bundan tashqari, Psixoaktiv moddalarga qaramlik organizmda turli somatik kasalliklar - yurak-qon tomir tizimi, jigar, buyrak, nafas yo'llari va oshqozon-ichak traktining surunkali kasalliklari rivojlanishiga sabab bo'ladi. Ayrim hollarda immun tizimi susayishi, yuqumli kasalliklarga (masalan, gepatitlar, OITS) chalinish xavfini ortishiga olib keladi [2,5,9].

Shuni alohida ta'kidlash kerakki, psixoaktiv moddalarga qaramlik insonni asta-sekin jamiyatdan ajralishiga, ijtimoiy faollik pasayishiga, atrofdagilar bilan sog'lom munosabatlar o'rnatish qobiliyatining yo'qolishiga olib keladi [7].

Reabilitatsiya markazlari va klinik kuzatuvlar ma'lumotlariga ko'ra, kimyoviy addiktiv buzilishlarga chalingan shaxslar orasida hayotdan umid uzish, ma'naviy bo'shliqlar mavjudligi va mavjudlikdan norozilik hissi ancha yuqori bo'ladi. Bunday psixologik holat o'z navbatida noxush oqibatlariga, xususan, o'z joniga qasd qilishga urinishlar sonining ortishiga sabab bo'ladi. Tadqiqotlar shuni ko'rsatadiki, Psixoaktiv moddalarga qaram bemorlar orasida suitsidal xatti-harakatlar uchrash chastotasi umumiy aholi o'rtasidagi o'rtacha darajadan 5-8 barobar yuqori. Bu holat, ayniqsa, og'ir depressiv epizodlar, ruhiy buzilishlar va motivatsion inqirozlar mavjud bemorlarda kuchliroq namoyon bo'ladi. Bunga qo'shimcha ravishda, ijtimoiy yolg'izlik, moliyaviy inqiroz, ish va turar joydan ayrilish, bularning barchasi suitsid xavfini yanada kuchaytiruvchi omillar sifatida namoyon bo'ladi [1,7,13].

Kimyoviy addiktiv buzilishlarga chalingan bemorlar uchun kompleks tibbiy-ijtimoiy reabilitatsiya - bu ko'p bosqichli, o'zaro bog'liq va uzviy kechuvchi tadbirlar tizimidir. Mazkur jarayon nafaqat organizmni detoksikatsiya qilish yoki giyohvandlikdan voz kechish kabi tibbiy choralarni, balki bemorning ruhiy holatini tiklash, ijtimoiy hayotga moslashtirish, kasbiy va oilaviy integratsiyasini ta'minlash, hayot sifatini yaxshilash va qayta retsidiylarning oldini olishga qaratilgan keng qamrovli profilaktik yondashuvlarni ham o'z ichiga oladi [6,12].

Biroq bu reabilitatsiya jarayonining muvaffaqiyati ko'plab tashqi va ichki omillar bilan chambarchas bog'liqdir. Ayniqsa, bemorning individual psixologik xususiyatlari, mavjud psixiatrik buzilishlari, oilaviy holati, ijtimoiy qo'llab-quvvatlash darajasi va yashash muhitining sifati asosiy rol o'ynaydi. Bu omillarning ko'pchiligi reabilitatsiya jarayoniga ta'sir ko'rsatuvchi asosiy xavf omillari sifatida baholanadi [4,5,14].

Shuningdek, bemorning motivatsiyasi past bo'lsa, reabilitatsiya dasturlariga bo'lgan ishonchi yetarli darajada shakllanmagan bo'lsa yoki u doimiy stressli muhitda bo'lsa, natijalar reabilitatsiya samaradorligi past bo'lishi mumkin. Ba'zan esa bemorlar ijtimoiy stigmatizatsiya, diskriminatsiya yoki huquqiy cheklovlar sababli zarur ijtimoiy resurslardan foydalana olmaydi. Bu holatlar reabilitatsiya samaradorligini keskin pasaytiradi va kasallikning qaytalanish xavfini oshiradi [11,15].

Adabiyotlar tahlili asosida kimyoviy addiktiv buzilish holatlarida kompleks tibbiy-ijtimoiy reabilitatsiya jarayonining samaradorligiga salbiy ta'sir ko'rsatuvchi omillar bir nechta asosiy

guruhlarga ajratiladi. Ulardan eng muhimlaridan biri - bu biologik omillardir. Ushbu omillar bemorning individual fiziologik xususiyatlari, irsiy omillar va markaziy asab tizimidagi funksional o'zgarishlar bilan bevosita bog'liq bo'lib, rehabilitatsiya jarayonining murakkablashishiga olib keladi [7,9,13].

Eng avvalo, biologik omillardan genetik moyillik omilini alohida ta'kidlash lozim. Tadqiqotlarga ko'ra, agar birinchi darajadagi qarindoshlarda (ota-onalar, opa-singillar yoki aka-ukalar) qaramlik holatlari aniqlangan bo'lsa, unda bu shaxsda psixoaktiv moddalarga qaramlikka chalinish xavfi umumiy populyatsiyaga nisbatan 3-4 barobar yuqori bo'ladi. Bu holat shuni anglatadiki, ayrim shaxslar tug'ma genetik zaiflik asosida bu patologik holatga nisbatan ko'proq moyillikka ega bo'lishadi [2,8,15].

Shuningdek, neyrobiologik o'zgarishlar ham psixoaktiv moddalarga qaramlikda muhim biologik xavf omillaridan biridir. Psixoaktiv moddalar ta'sirida ayniqsa miya dopamin tizimida muvozanat buzilishi kuzatiladi. Dopamin - bu miyadagi "rag'batlantirish" tizimining markaziy elementi bo'lib, motivatsiya, zavq, xursandchilik va harakatlantiruvchi kuchlarni boshqaradi. Qaramlik rivojlanganda bu tizimda yuzaga kelgan o'zgarishlar natijasida bemor tabiiy lazzatlanish manbalariga (masalan, ijtimoiy aloqa, ish faoliyati, oilaviy munosabatlar) nisbatan befarq bo'lib qoladi va faqat psixoaktiv moddalar orqali qisqa muddatli qoniqish his qiladigan holatga tushadi. Ushbu neyrobiologik o'zgarishlar esa rehabilitatsiya jarayonida motivatsion pasayishga, davolash va ijtimoiy ko'maklashuvga nisbatan sust munosabatga sabab bo'ladi [4,7,16].

Kimyoviy addiktiv buzilishlarga chalingan bemorlarning rehabilitatsiya jarayoniga salbiy ta'sir ko'rsatadigan asosiy xavf omillaridan biri sifatida alohida e'tiborga loyiqdir. Bu omillar, odatda, shaxsning individual ruhiy tuzilishi, ichki emotsional muvozanati, ruhiy salomatlik holati va stressga nisbatan chidamlilik darajasi bilan chambarchas bog'liq bo'ladi [9].

Bemorlarning shaxsiy xususiyatlari rehabilitatsiya jarayonining murakkabligiga bevosita ta'sir ko'rsatadi. Tadqiqotlar shuni ko'rsatadiki, psixoaktiv moddalarga qaramlikka chalingan ko'plab shaxslarda impulsivlik (ya'ni harakatlarini oldindan o'ylamasdan bajarish), hissiy beqarorlik, qaror qabul qilishdagi sustkashlik va o'z-o'zini baholash darajasining pasayganligi kabi belgilarga tez-tez duch kelinadi. Aynan past o'zini qadrlash hissi bemorlarni doimiy ravishda o'zini inkor qilish, umidsizlik va befoyda hayot tarzini davom ettirishga majbur qiladi, bu esa rehabilitatsiya samaradorligini keskin pasaytiradi [6,11,15].

Bundan tashqari, psixoaktiv moddalarga qaramlik ko'pincha boshqa ruhiy buzilishlar bilan komorbidlikda kechadi. Xususan, statistik ma'lumotlarga ko'ra, qaram bemorlarning 40-60 foizigacha bo'lgan qismida xavotirli-depressiv buzilish holatlari aniqlanadi. Bunday hollarda bemor faqatgina qaramlik bilan emas, balki bir vaqtning o'zida depressiya, xavotirli hamda uyqu buzilishlari va boshqa psixopatologik simptomlar bilan ham kurashishga majbur bo'ladi. Bu esa rehabilitatsiya choralari bo'lgan javobni susaytiradi, motivatsiyani pasaytiradi va bemorning psixoterapevtik yordamlarga bo'lgan ishonchini kamaytiradi [11,17].

Yana bir muhim psixologik omil bu - stressga nisbatan past bardoshlilikdir. psixoaktiv moddalarga qaram bemorlarning ko'pchiligida kundalik hayotdagi stress omillariga (masalan, oilaviy muammolar, ishsizlik, ijtimoiy bosim) bardosh berish qobiliyati juda past bo'ladi. Bu holatlarda bemor stressni yengillashtirish vositasi sifatida yana psixoaktiv moddalarga murojaat qiladi va natijada retsidiv holatlar yuzaga keladi. Rehabilitatsiya jarayonida stressga bardoshlilikni oshirishga qaratilgan psixoterapevtik yondashuvlar yetarlicha amalga oshirilmasa, natijadorlik sezilarli darajada pasayadi [4,9,13].

Ijtimoiy omillar ham psixoaktiv moddalarga qaramlikka chalingan bemorlarning rehabilitatsiya jarayoniga sezilarli ta'sir ko'rsatadigan muhim tashqi omillardan biri hisoblanadi. Bu omillar bemorning oilaviy muhiti, ijtimoiy munosabatlar doirasi, iqtisodiy holati va ijtimoiy qo'llab-quvvatlash tizimining mavjudligi bilan chambarchas bog'liq bo'lib, tiklanish jarayonining ijobiy yoki salbiy tomonga o'zgarishida asosiy rol o'ynaydi [11].

Avvalo, noto'g'ri oilaviy muhit psixoaktiv moddalarga qaramlikning shakllanishi va mustahkamlanishida hal qiluvchi omillardan biridir. Bemor bolaligidan mehr-muhabbat yetishmasligi, ota-onaning doimiy janjallari, zo'ravonlik holatlari, e'tiborsizlik yoki haddan tashqari

qattiqqo'lik muhitida ulg'aygan bo'lsa, bu holatlar ruhiy rivojlanishga salbiy ta'sir ko'rsatadi va stressga nisbatan himoyasizlikni kuchaytiradi. Bunday shaxslar psixoaktiv moddalardan vaqtincha "xaloskor" sifatida foydalanishga intiladi, bu esa oxir-oqibatda chuqur qaramlikka olib keladi. Reabilitatsiya davrida esa, agar bemor yana salbiy oilaviy sharoitga qaytsa, bu uning davolanishga bo'lgan motivatsiyasini pasaytiradi va retsivlanish (qaytalanish) ehtimolini oshiradi [8,14,17].

Shuningdek, atrof-muhit va do'stlar ta'siri ayniqsa o'smirlar va yoshlik davridagi shaxslarda juda katta ahamiyatga ega. Psixoaktiv moddalarni suiiste'mol qiladigan do'stlar guruhiga qo'shilish, salbiy ijtimoiy me'yorlar hukmron bo'lgan muhitda yashash yoki ijtimoiy bosim ostida qolish kishi ongida psixoaktiv moddalarni "qochish yo'li" sifatida qabul qilishiga sabab bo'ladi. Bu esa nafaqat qaramlikka olib keladi, balki davolanish jarayonida ham ijtimoiy qo'llab-quvvatlovning yo'qligi sababli ijobiy natijalar sustlashadi. Shu boisdan, reabilitatsiya jarayonida atrof-muhitni sog'lomlashtirish va salbiy ijtimoiy aloqalarni cheklash muhim strategik vazifa hisoblanadi [9,16].

Yana bir muhim omil bu - ishsizlik va ijtimoiy beqarorlikdir. Mehnat bilan bandlikning yo'qligi, iqtisodiy qiyinchiliklar, doimiy daromad manbasining mavjud emasligi psixoaktiv moddalarga qaramlik xavfini oshiradi. Ishsiz shaxslar ko'pincha vaqtini mazmunsiz o'tkazishga majbur bo'ladi, bu esa psixoaktiv moddalarga murojaat qilish imkoniyatini oshiradi. Bunday shaxslar o'zini jamiyatda keraksizdek his qiladi, ijtimoiy izolyatsiya kuchayadi, psixologik beqarorlik vujudga keladi. Buning natijasida reabilitatsiya jarayonida motivatsiya zaiflashadi, ijtimoiy moslashuv sekinlashadi. Shu boisdan reabilitatsiya jarayonining muhim tarkibiy qismi sifatida kasbiy reabilitatsiya, ishga joylashtirish, ijtimoiy rollarni tiklash kabi yo'nalishlar kiritilishi lozim [6,8,13].

Ekologik omillar psixoaktiv moddalarga qaramlikning shakllanishi, rivojlanishi va reabilitatsiya jarayonining natijadorligiga sezilarli ta'sir ko'rsatadigan tashqi muhit bilan bog'liq omillar qatoriga kiradi. Bu omillar odam yashaydigan hududning ekologik holati, psixoaktiv moddalarga kirish imkoniyati va turmush sharoitlari bilan chambarchas bog'liqdir. Eng avvalo, yashash joyining ijtimoiy va ekologik xususiyatlari muhim rol o'ynaydi. Aholining zich yashaydigan, ekologik jihatdan noqulay bo'lgan yoki jinoyatchilik darajasi yuqori bo'lgan hududlarda psixoaktiv moddalarning noqonuniy aylanishi ko'proq uchraydi. Bunday joylarda turmush tarzi odatda past bo'lib, yoshlar va o'smirlar uchun salbiy ijtimoiy namunalar keng tarqalgan bo'ladi. Bundan tashqari, sog'lom madaniy-ko'ngilochar infratuzilmaning yo'qligi, ijtimoiy nazoratning sustligi va ish bilan bandlikning past darajasi psixoaktiv moddalardan foydalanish xavfini orttiradi [3,7,11,16].

Psixoaktiv moddalarga qaramlikning shakllanishida yoshlik davrida duch kelish holatlari, oilaviy muhit va ijtimoiy qo'llab-quvvatlash tizimi yetishmovchiligi muhim xavf omillari sifatida ajralib turadi. Tadqiqotlar natijasiga ko'ra, psixotrop moddalarga erta, ya'ni 14-17 yosh oralig'ida duch kelgan shaxslarda psixoaktiv moddalarga nisbatan barqaror psixologik va fiziologik qaramlik shakllanish xavfi deyarli 70 foizga yaqin bo'ladi. Bu holat o'smirlar davrida shaxsning ongli qaror qabul qilish qobiliyati hali to'liq shakllanmaganligi, emotsional beqarorlik va tashqi ta'sirlarga bo'lgan yuqori sezuvchanlik bilan bog'liq [11,14,18].

Shuningdek, oilaviy beqarorlik, uyda mavjud zo'ravonlik holatlari, psixologik yoki jismoniy e'tiborsizlik psixoaktiv moddalarga qaramlikka olib boruvchi asosiy ijtimoiy omillar qatoriga kiradi. Kuzatishlarga ko'ra, qaramlik bilan davolanayotgan bemorlarning 60-75 foizi beqaror oilaviy sharoitda ulg'aygan yoki shunday muhitda yashashda davom etmoqda. Bunday muhitda o'sgan shaxslar ko'pincha hissiy bo'shliqni to'ldirish, tashvish yoki ruhiy og'riqni yengillashdirish maqsadida psixoaktiv moddalardan foydalanishga urinadilar. Afsuski, bu urinishlar ko'pincha surunkali qaramlik holatiga olib keladi [3,5,9,14].

Ijtimoiy qo'llab-quvvatlash tizimining zaifligi ham reabilitatsiya samaradorligini sezilarli darajada pasaytiradi. Ma'lumotlarga ko'ra, bemorning ijtimoiy himoyasi yoki yaqinlarining doimiy emotsional yordami mavjud bo'lmagan holatlarda qayta qaramlik (retsiv) rivojlanish ehtimoli ikki baravar ortadi. Bu holat psixoaktiv moddadan voz kechish yo'lida yakkalanib qolgan shaxslarning zaif emotsional holatini aks ettirib, ularning tiklanishdagi muvaffaqiyatsizlikka uchrash xavfini kuchaytiradi [6,9,17].

Shu bilan birga, kompleks yondashuv asosidagi reabilitatsiya dasturlarining samaradorligi yuqori baholanmoqda. Ayniqsa, xavf omillari - ya'ni oilaviy muhit, ijtimoiy qo'llab-quvvatlash

darajasi singari omillar tizimli ravishda nazoratga olingan va bartaraf etilgan holatlarda ijobiy natijalar kuzatilmogda. Bunday holatlarda reabilitatsiyaga jalb etilgan bemorlarning 80 foizdan ortig'i davolashga ijobiy javob qaytargan, ular orasida retsivlanish holatlari minimal darajada bo'lgan [7,13].

Ushbu ma'lumotlar shuni ko'rsatadiki, psixoaktiv moddalarga qaramlik faqat individual tanlov emas, balki ko'plab ijtimoiy, oilaviy va psixologik omillar bilan bog'liq murakkab jarayon bo'lib, uni samarali oldini olish va davolash faqat kompleks yondashuv va ko'p darajali qo'llab-quvvatlash orqali mumkin bo'ladi.

**Xulosa.** Kimyoviy addiktiv buzilishlarga chalingan shaxslarning tibbiy-ijtimoiy reabilitatsiyasi samaradorligiga ta'sir ko'rsatuvchi xavf omillari orasida erta yoshda psixoaktiv moddalarni sinab ko'rish, oilaviy beqarorlik, psixologik beparvolik, zo'ravonlik holatlari va ijtimoiy qo'llab-quvvatlov yetishmovchiligi alohida o'rin tutadi. Ushbu omillar reabilitatsiya jarayonini murakkablashtirib, qayta qaramlik (retsiv) xavfini oshiradi. Tadqiqotlar shuni ko'rsatadiki, reabilitatsiya samaradorligini oshirish uchun xavf omillarini erta aniqlash, ularni tizimli nazoratga olish va bemorning ijtimoiy muhitini barqarorlashtirish zarur. Shuningdek, kompleks, ko'p bosqichli yondashuv - psixoterapiya, ijtimoiy adaptatsiya, oilaviy maslahat va monitoringni o'z ichiga olgan reabilitatsiya dasturlari ijobiy natija beradi. Demak, samarali reabilitatsiya uchun nafaqat tibbiy, balki ijtimoiy va psixologik omillarni ham to'liq hisobga olish muhim hisoblanadi.

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