

COMPARISON OF THE RESILIENCE OF THE WIVES OF MEN DRUG ABUSE AND NORMAL MEN SUPPORTED BY TEHRAN WELFARE ORGANIZATION (2012)

Babollah Bkhashipoor¹, Seyed Hamze Hoseini²,

Hosein Biniaz³, Shahrbanoo Malekzade⁴, Roshanak Eskandari Rad⁵, Hamid Reza Eskandari Rad⁶

¹ Department of Psychology, Faculty of Psychology and Educational Sciences, Islamic Azad University, Sari, Iran

² Psychiatry and Behavioral Sciences Research Center, Mazandarn University of Medical Sciences and Health Services, Imam hospital, Sari, Mazandarn, Iran

^{3,4,6} Faculty of Psychology and Educational Sciences, Islamic Azad University, Sari, Iran

⁵ B.A Student in Clinical Psychology

Corresponding Author: Email: Skandari20@yahoo.com

ABSTRACT: Addiction, today, is definitely a global problem and as a complete issue in Iran sets the stage for many social and family vulnerabilities, and also results in irreparable damages in family regardless of such direct effects as physical and psychological damages on the addict person that cause to the wife's psychological and behavioral imbalance hence, the aim of the present study is to compare resiliency of the wives of men with drug abuse with the normal. This study is descriptive (non-experimental) and is considered as control case in the research classification. The statistical population of the group includes all the 2400 drug abuse people in the (Public and Private) Preventing Welfare Centers in Rey City. Documents of all of them are available since 2012 and the statistical population of the control group consists of all the parents (wives and husbands) of the normal people in Rey City that are simulated with the control group A after performing study and obtaining the data base on demographic data (age, gender, education). The sample size of the case study in the case group is determined 175 people among the wives of the drug abuse men and the sample size of the control group is determined 152. The sampling method used in this study was the available one Connor and David Sun questionnaire were used for collecting data. The data are analyzed through independent t-test and software SPSS-16. According to the study, there is a significant difference between the rate of resiliency of the wives of the drug abuse men with the normal ones ($p= 0.05$). The results showed that there is a significant difference in the rate of resiliency of the spouses of the drug abuse men with the normal.

KEYWORDS: Resiliency, Wives of drug abuse men and the normal

1. INTRODUCTION

Drugs dependence effects negatively on different psychological- social and physical aspects of one's life. This dependence puts the person under such psychological and physical pressure that he/she ignores others, and his/her relationships with them and even sacrifices his/her own health and other's on using drugs [1,2]. In addition to personal-social problems, addiction are considered a family issue [3, 4, 5]. Effects of addiction are widespread in families. Addiction, in family environment, cause to increasing rate of separation and divorce, violence and arguments, health problems, child abuse and spouse abuse [4,6,7,8]. According to the mood and cognitive changes associated with men's addiction, which result in conflict, tension and family-psychological pressure in family life; and also because of his lack of doing the role or fading his role, all of his material and spiritual duties and responsibilities will be on his wife's side. This issue can heighten her duties so put seriously her under pressure that cause to reducing her resiliency and withstanding against life's pressure [9,10]. Resiliency as a personal trait and a dynamic process, includes a positive adjustment with a disaster condition. Resiliency not only relates to individual's personal characteristics, but also relates to vulnerability and environmental protection factors. Some psychologists defined the resiliency as a positive achievement process and obtaining unexpected results despite the disastrous situations [11]. Terms such emotion resiliencies, psychological resiliency, strong-ness, being wise and psychological resistance are considered as resiliency. It is also mentioned as supporting factor that leads to a better life and as a barrier against some threats [12]. Resiliency is a

multidimensional structure, including temperament variables (mood and character) along with such special skills as solving problems [13]. Some researchers associated resiliency with to the individual's ability in successfully adapt to the high psychological stress, trauma and severe disasters. People, who positively and adaptively react to the physical-psychological and biological- mental stress, are considered as resiliency [14,15]. Researches have shown that the resilient people use positive emotions and smart ways against the pressures in achieving the aim and adaptation [16]. Some scholars regard the resiliency as a growth after damage. Resiliency, in this sense, means both increasing ability of withstanding and adapting the person with the problem, and more important, keeping mental health and its promotion [17]. The term resiliency was mentioned in the psychological literature for the first time from students on children with schizophrenic parents around the year 1980. These researches cleared that such children are incapable of receiving the parent's comfort care compare to children with healthy parents, and this has a significant effect on their academic process and development [18]. According to the studies, the rate resiliency of wives of the addicted husbands is low [9]. It is hoped that regarding the recent study on the pathology of addiction, some complexities related to addiction are cleared by considering structures like family and necessity of identifying effects of this sinister social phenomenon on the addict and his family, and the society be helped in prevention and reduction of this major social problem.

Table 1: Demographic characteristics of the participants in the control group

Educational field						Age				Participants of the control group	
Bachelor and more		Diploma and Advanced Diploma		Elementary		36-46		20-35			
percent	frequency	percent	frequency	percent	frequency	percent	frequency	percent	frequency	percent	frequency
11.8	18	72.4	110	15.7	24	44.7	68	55.2	84	46.5	152

Table 2: Demographic characteristics of the participants in the case group

Educational field						Age				Participants of the case group	
Bachelor and more		Diploma and Advanced Diploma		Elementary		36-46		20-35			
Percent	Frequency	percent	frequency	percent	Frequency	percent	Frequency	percent	frequency	percent	frequency
0.6	1	56	98	43.4	76	50.3	88	49.7	87	53.5	175

Table 3: Mean, standard deviation, t-test, scores of resiliency of wives of the drug abuse men and the normal men

Significant level α	Df	N	Critical t	t	Standard deviation	average	number	condition
0	325	7	1.96	4.478	15.5	51.79	175	Case group
					15.54	59.5	152	Control group

2. MATERIALS AND METHODS

The present study is a case-control study. The statistical population of the case group includes all wives of the 2400 drug abuse men in the (Public and Private) Preventing Welfare Centers in Rey City that are documented in 2012. The statistical population of the control group includes all wives of men living in the city of Rey, and has also no drug abuse history. The statistical sample of the case group is chosen according to such variables as age, marital status, education, place of residence and income. Besides, the statistical sample of the control group is selected randomly. Rules of participation in the case group are: using one of a variety of drugs, aged between 18-35, education, at least the third degree, a resident of the city, at least for a month in treatment, income at least 200,000 to man in month and being married. Dismissal standards (rules) are: no drug abuse, aged less than 18 and more than 35, education less than the third degree, living in a village, the treatment period less than one month, monthly income less than 200,000 to a man and being single. The number of samples is 327 people (157 people in the case group and 152 people in the control group) based on the Krejcie and Morgan table; they're selected of the statistical population. The Connor and David Sun questionnaire is used to gather information: Connor and David Sun developed the questionnaire in the year 2003 by reviewing and studying the research sources on the Resiliency in 1991-1997. The psychometric scale is evaluated in six groups: the public, refers to the primary care section, psychiatric outpatients, patients with pervasive anxiety disorders, and two group of parents with post-traumatic stress

disorder [19]. The scale developers believe that the questionnaire thoroughly able to distinguish the resilient ones of the non-resilience in the clinical and non-clinical group; and can also be used in the research and clinical situations. The resilience questionnaire can be applied to individual and groups. The questionnaire is prepared in 25 questions that are graded on a Likert scale among zero (completely false) and four (always true). The scale standardized by Mohammadi in 2003 the minimum score is zero and the maximum is 100 [20]. The average score is 50, so that the more the experiments score be higher than 50, the ore resiliency is; and the score closer to zero, the resiliency is less. First, to validate the questionnaire, the correlation of each question with total score of the questions has been calculated, and then the factor analysis method has calculated. The calculation of each score with the total score showed that the coefficient were between %41 to %64, except question number 3. Next, the questions are analyzed in factor by using the principal components method. Two KMO index and Bartlett test were calculated before obtaining factors base on the question's correlation matrix. The KMO value equal to %87 and the Bartlett's chi-Square was 28/5556; both of them revealed the indicators of the evidence's efficiency to performing the factor analysis.

3. Findings

The member of participants in the case group is 175 and in the control group is 152. The age ranged was 20 to 46 and their educational degrees are from elementary to bachelor and above. Tables 1 and 2 show the demographic characteristics of the participants of the research. The independent t-test was applied to study the hypothesis in which there is a difference

between resiliency of the wives of the drug abuse men and the normal men. Results of table 3 show that there is a significant difference between the scores of the resiliency of the wives of drug abuse men and the normal men's in the level of alpha 0.05. Therefore, we can say with % 95 certainties that there is a significant difference between resiliency of the wives of the drug abuse men and the normal; and the resiliency of the wives of drug abuse men is less than the control group. $t=4/478$ in the %95 level of reliability ($\alpha=0.05$) and degree of freedom 325 more than the critical table ($t=1/96$). So, there is statistically significant difference between wives of the drug abuse men and the normal.

4. DISCUSSION

The present study aimed to compare the resiliency of wives of the drug abuse men and the normal men. According to the obtained results, it is concluded that the resiliency of wives of the drug abuse men is less than the normal group, because of the governing relationships, challenges and interpersonal conflicts. This result follows some researches Bitsika [22], APA (23), Gomes and Laren [24], Nori (9), Kaveh [25], Sheykholeslami [26]. The results imply that addiction of the spouse, cause to increasing mental pressure, conflict, physical and verbal dispute, anxiety, confusion and conflicts in children relationship beside economic difficulties [27].

Also, other problems in the interpersonal relationships, instability, violence, child abuse, sexually transmitted disease and HIV risk are considered as other problems of wives of addicted men [28]. Living with addicted men and inappropriate living conditions has been reduced the resiliency and has been prone them to a variety of problems and mental disorders [9].

Findings show that resiliency is positively associated with components of life quality (Physically general health, family relationships, cultural and spiritual life, and leisure time and etc.) [29] and mental health [24] and is negatively associated with psychological distress [13]. Increase resiliency cause to improving the quality of life [29] and decreasing depression, anxiety, addiction and aggression [24] and; the low levels are associated with vulnerability to psychological disorders [13]. It is also noted that wives of addicted men lose their resiliency due to challenging and threatening situation of life and stressful conditions, and are lack of positive sense to overcome mental pressures, stressful and negative events that make them not adapt themselves with the situation. By flash and exciting manner and by negative assessment of the stressful events, they react emotionally and temporally to reduce stress.

They are also in trouble with social relationship due to other's blame. While wives of the normal men able to withstand and management of the problems in challenging and stressful situations and are positively efficient and flexible against life events and issues; and try to solve them by reasonable and positive assessment of the stressful events. In addition, they have wider and stronger social ties. Wives of the normal men are keener in their duties and more sensitive to do their responsibilities.

On the other hand, wives of the drug abuse men question or doubt their ability against the life's problems and feel frustration and despair when are incapable of solving them.

They are vulnerable against their life's stressful conditions (addicted husband, unemployment and his lack of income) and attributed the current situation to their own incompetency and their husbands', and unchangeable. Therefore, they don't try to follow a reasonable situation to solve the problem. Living in a family involved in addiction, is painful. Addiction is a painful experience in varying degrees; a wide range of behavioral, emotional and psychological problems are considered characteristics of such families. Living with addiction is painful for the family member (30). It has been observed that several factors moderate negative effects of the poor situations of life and act as protective factors. Most studies showed that the family member relationship has a protective role, and families with stringer relationships, possess more control on the family life and provide positive public identity and a safe environment. Also, they spend more time in areas such as entertainment, sports for the family and helping each other play a key role in their alliance (31). Love and hope, encouragement from the family and outside are considered other protective factors of resiliency. Beside, having actual plans and programs, self-competency, self-positive image, expanding communication skills and ability to control the impulses and self-strong feeling are other improving sources of resiliency (32). Also, religion, devotion to God [33] spirituality [13] and self-pastoral care to improve emotional-social and physical performance led to increasing resiliency (34). In Zurich study, role of wit and humor is stated as an important coping mechanism that keeps the joy and increase resiliency [36]. Other protective factors such as optimism and social support balance the negative effects of environmental threats and stressful conditions and vulnerabilities. Werner introduced 3 categories of supported factors: 1- Personal characteristics including geniality, cleverness and positive self-concept 2- Family properties including close relationship with one of the member of family or having emotional parents 3- Relationship including support or advice by peers [37].

5. Suggestions

Psychological Association of American suggested 10 ways to create and increase resiliency:

- 1-To establish good relationships with family members, friends and others
- 2- To avoid conflicts in stressful and critical events and unbearable problems
- 3- To accept the unchanged conditions
- 4- To develop the realistic goals and move toward them
- 5- Firm steps in unfavorable conditions
- 6- Searching for opportunities to more self-exploration and understanding after passing of the crisis
- 7- Developing self-competency
- 8- To establish the long-term prospects and prepare for future stressful events in other areas
- 9- The persistence of hope, positive expectations and visualize desires
- 10- Psyche and body care, regular exercise and physical movements, pay attention to own feelings and needs.

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