PSYCHOLOGICAL WELLBEING OF ADULT SUBSTANCE USERS AND NON **USERS: A COMPARATIVE STUDY**

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ABSTRACT

OBIECTIVE

To explore the differences in psychological wellbeing among substance users and non-users.

STUDY DESIGN

Comparative research design.

PLACE AND DURATION OF THE STUDY

Data were collected from different drug rehabilitation centers of Karachi, Pakistan, from January 2019 to May 2019.

SUBJECTS AND METHODS

The sample comprised of 300 participants aged 18 to 45 years, among them 150 were diagnosed with substance use disorder (selected from different drug rehabilitation Centre of Karachi) and 150 participants without any disorder (selected from normal population). Ryff Scale of Psychological Well Being and a detail Demographic Interview Information form were administered using convenient sampling technique, while statistical analysis was done by using SPSS 20.

RESULTS

Out of 300 participants, 195 (65%) were males and 105 (35%) were females. The mean age was 24.65±4.88 years. Adults with substance use disorder had relatively low scores on overall construct of psychological wellbeing than adults without substance use. Whereas, adults without substance use scored higher on the measure of autonomy, personal growth, self acceptance and purpose in life as compared with adults having substance use disorder. (p<0.01).

CONCLUSION

Adults with substance use disorder showed lower psychological wellbeing on the measures of autonomy, purpose in life, environmental mastery and selfacceptance as compared with normal counterparts.

KEY WORDS

Autonomy, Self acceptance mastery, Personal growth, Purpose and positive relations.

INTRODUCTION

Psychological wellbeing is an integral part of life for every individual. In psychological wellbeing, an individual has capacity to use his or her cognitive and emotional capabilities to form relationship with others, make daily life decisions and work for interest and refer for tremendous mental health.¹ There are six factors of psychological wellbeing which are present in the form of combination, and these elements are similar for every individual to spend a balanced and healthy life. These include: Self-acceptance that refers to an individual's recognition about his own negative and positive personality's aspects, thus this is about the feelings and attitude towards self. Another important dimension of psychological wellbeing is "Positive relations with others" which is based on true relationship with people including trust, warmth and satisfaction. In Autonomy a person shows resistance towards social pressures, try to live an independent life and have personal standards with self-determinations. In Environmental mastery a person knows how to recognize every possibility and avail them according to their surroundings and that person hold power of superiority. While purpose in life reflects self organizing life that lead towards goals and personal growth indicates a sense of continued development across life span.²

Low level of psychological well-being include: disturbed relationship with others, lack of autonomy, decrease environmental mastery, lack of purpose in life, and personal growth make people vulnerable towards escape from unwanted situations and this escape lead them towards drug abuse. Adulthood is a complex stage as a reason most of the individuals experience stress, anxiety and depression as a part of their life and it affects their psychological wellbeing for a time being.³ According to Arnett, emerging adulthood is viewed to be a positive developmental stage but it has greater challenges to face like constant stress.⁴

Adulthood is taken into consideration to be the important stage as it gives the more opportunity in the areas of work, identity exploration and life in general.³ According to Barlow and Durand's theoretical perspective that individual started to use addictive substances in adulthood as means to escape when life poses too many challenges.⁵ The predominant factor reflect that family environment and initial life incident can affect a person's psychological wellbeing and the complexity will further linger on in adulthood.⁶ If an individual is not able to handle his stress due to his low coping strategies his wellbeing gets affected and he becomes vulnerable to take addictive drugs.⁷ Many longitudinal studies suggest that there are chances of both the continuation and discontinuation of healthy and unhealthy paths but it depends on a person's psychological wellbeing.⁸ According to King and Chassin exposure to any stressors elevates negative emotional state (or internalizing symptoms) which results in negative feelings in turn lead to high substance use and risk for substance-use disorders.⁹

Journal of Pakistan Psychiatric Society

Substance abuse is not only the health problem but it is also considered to be a social problem for family and society and it affects the person's psychological wellbeing.⁷ Since the beginning of last century various scientifically based theories have been developed in order to understand the mechanism of substance use. All over the world data suggested that use of any substance starts around the age of 14 or 15 years. Furthermore, psychiatric comorbidity is also evident among adolescents and adults in different modalities.⁵

According to the report of United Nations Office on Drugs and Crime (UNODC) 2013, 6.7 million adults in Pakistan misused illicit drugs.¹⁰ Between the age of 15 and 64 years more than 800,000 are addicted to use heroin on a regular basis. The most commonly used drug throughout world is Marijuana. 3.6% of the youngsters or 4 million people of Pakistan use Cannabis which is listed as the most commonly used drug in the country, while 1% of the drug users are addicted to opiates, namely opium and heroin. The most worrying element is that a considerate proportion of these heroin addicts are under the age of 24.¹¹The youngsters of Pakistan are heavily affected by drugs, it is imperative to investigate the indicators of psychological wellbeing among substance user, this is the reason why this current study is planned in order to investigate the difference between psychological well being between substance users and non users on the variables of personal growth, positive relations with others, environmental mastery, autonomy self acceptance and purpose in life,⁵ so by capitalizing on their strength, their treatment plan could be devised to bring them to mainstream.

SUBJECTS AND METHODS

Participants

This comparative study was conducted in Karachi, Pakistan, from January 2017 to September 2017 and comprised of adults, aged between 18 to 45 years. The sample consisted of individuals who were diagnosed with substance use disorder and they all were included through convenient purposive sampling from different drug rehabilitation centre of Karachi.; these participants were diagnosed as per diagnostic criteria of substance use disorder of Diagnostic and Statistical Manual of Mental Disorders (DSM-V)¹² by rehabilitation recoveries, sociologist and trained and qualified clinical psychologists. A group of non substance users was drawn for comparison through convenient sampling technique. Participants of both groups, belonged to all three socioeconomic classes that include: upper, middle, and lower socioeconomic background.

Instruments

An indigenous demographic information questionnaire was administered for all participants that included, participant's gender, age, education, family system, socioeconomic status, type of substance use and how long they have been using addictive substance.

Ryff Scale of Psychological Well-being

The Ryff Scale of Psychological Wellbeing (54 items Urdu translation) is a theoretically grounded instrument to assess individuals Psychological Wellbeing and focuses on measuring six

dimensions of Psychological Wellbeing (PWB): autonomy, environmental mastery, personal growth, positive relations with others, self acceptance and purpose in life. It is scored on a 6 point scale ranging from "strongly agree" to "strongly disagree" (1 indicating strong disagreement and 6 indicating strong agreement). Each dimensional scale contains 9 items, equally split between positive or negative items.¹³

Procedure

For the present study, the ethical approval was provided by the Board of Advance Studies and Research (BASR), University of Karachi. Authorities of treatment centre were contacted to get excess to the sample. Participants with substance use disorder were contacted through various drug treatment and rehabilitation centers. They were approached after taking formal written permission from New Horizon Rehabilitation Center, Shaheed Naveed Yonus Drug Treatment Center, Al Haq Drug Treatment Center and Darul Nijat. After takinf informed consent rapport was developed to make participants ready for participation. They were assured that their results would be kept confidential and only used for research purpose.

After taking consent from authorities and participants, the personal case files of admitted participants seeking professional services for substance use were reviewed in order to select a better sample in the light of the inclusion criteria. The participants above 18 is included in this study, participants with severe mental health problems those who mainly had psychosis, neurological or neurocognitive disorder were excluded from the study.¹⁴ The substance users who were under detoxification process were also excluded from the study too. Research tool was administered to the participants.

Data were tabulated in SPSS v. 20, including descriptive statistics that measures frequencies and percentages of demographics of participants. Independent sample t-test was carried out to analyze the mean score difference among group of users and non users.¹⁵

RESULTS

Out of 300 participants, 105 (35%) were females and 195 (65%) were males. The mean age was 28±4.88 years. The participants living in nuclear family system were 157 (53%). 222 (74%) participants belonged to middle socioeconomic status (SES), 39 (13%) belonged to lower-middle and only 38(12%) belonged to upper middle SES. Table 1 indicated use of drugs, length of use and type of drug abused in participants with substance use disorder. 150 participants (50% of sample) used illicit drugs in which 82 participants (54.66%) reported use of heroin while 34 participants (22.66%) were taking cannabis.

Overall results were found to be consistent with hypotheses i.e. There is a significant difference between psychological wellbeing on the six measures of self acceptance environmental mastery, personal growth, positive relations with others, autonomy and purpose in life among substance users and non users.

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Table 1

Use of drugs, length of use and type of drug abused in participants with substance use disorder (N=150).

Variables	Frequency	%	
Use of drugs			
Participants using drugs	150	100%	
Type of drug used			
Cannabis	34	22.66	
Heroin	82	54.66	
Alcohol	5	3.33	
Cocaine	1	0.6	
Multiple drugs	28	18.66	
Length of drug use			
5 years	25	16.66	
5-10 years	53	35.33	
10 to 15 years	47	31.33	
15 to 20 years	15	10	
20 to 25 years	7	4.6	
Above	3	2	

Table 2

Comparison of difference statistical mean scores on the six domains of psychological well being among control and experimental group.

Variables	Groups	Mean	SD	df	t	р
Autonomy	Substance users	28.62	5.4			
	N=150			298	-10.1	0.01
	Substance non users	35.38	6.08			
	N=150					
Environmental	Substance users	27.72	7.7			
Mastery	N=150			298	-10.03	0.01
	Substance non users	35.87	6.2			
	N=150					
Personal	Substance users	29.06	4.2			
Growth	N=150			298	-5.77	.0.01
	Substance non users	32.01	4.6			
	N=150					
Positive	Substance users	32.01	9.5			
Relations with	N=150			298	-12.9	0.01
others	Substance non users	26.74	6.9			
	N=150					
Purpose in life	Substance users	30.16	4.8			
	N=150			298	-13.15	0.01
	Substance non users	38.19	5.4			
	N=150					
Self Acceptance	Substance users	24.62	7.03			
	N=150			298	-17.10	0.01
	Substance non users	38.28	6.7			
	N=150					

Table 2 presented scores on psychological well being between two groups. The mean difference indicated a variation between both groups on all measure of psychological wellbeing including, autonomy, environmental mastery, personal growth, positive relations with others, purpose in life and self acceptance (p<0.01).

On the variable of autonomy, the mean score of adults with substance used disorder is 28.62 and for adults without substance use is 35.38, the difference is statistically significant. The difference of both groups on the variables of environmental mastery (m = 27.72 for users and 35.87 for non users) and

personal growth (m = 29.06 for users and 32.01 for non users) is also significant.

Whereas, the mean score of positive relations with others among substance users and non users also differ significantly (32.01 for users and 26.74 for non users). Furthermore, the mean score of purpose in life of substance users and non users is also evident of significant difference, (30.16 for users and 38.19 for non users). Lastly the scores of substance users on the variable of self acceptance is 24.62 as compared with non users which is 38.28 makes it clear that the self acceptance of non user adults is higher as compared with users.

DISCUSSION

The study was designed to assess the difference in the six facets of psychological wellbeing between substance users and non users. The results showed that the findings are consistent with the hypothesis formulated regarding the difference between scores, the results revealed that adults with substance used disorder scored low on the all domains of psychological wellbeing including, self acceptance autonomy, environmental mastery, personal growth and purpose in life. Whereas on subscale of positive relations with others users scored higher than non users.

Researchers have also found the relationship between drug addiction and psychological wellbeing. As concluded by Morgan and his colleagues in one year longitudinal study, they studied the consequences of chronic ketamine administration upon neurocognitive function and psychological wellbeing and the result found to be consistent with formulated hypothesis as the participants showed low level of psychological wellbeing and affected neurocognitive functionung.¹⁶

Autonomy reflects a sense of independence and self determination and a desire to stands up for own beliefs and ideas even with external pressures.¹⁷ Autonomy in substance use disorder deteriorated as participants indulge in addictive behavior. A sense of autonomy reflects that a person is able to hold out against social pressure and to think and react in certain way, but person with substance use disorder conform to social pressures and mostly rely on the judgments of others due to impaired thinking.¹⁸

Environmental mastery entails feelings of personal competence and confidence in one's ability to interact successfully with the environment. Whereas, personal growth entails openness to new experiences and a commitment of development and learning new experiences.¹⁷ The difference of both groups on the variables of environmental mastery and personal growth is significant. Havassy and Arns conducted a study in order to know about the relationship between substance dependence with psychological wellbeing and psychosocial functioning, their focus was on depression, self esteem, environmental mastery and quality of life among drug abusers. The result concluded that they had high depression, feel insecure in their environment, lack in environmental mastery and they were less satisfied with their lives and its situations. Personal development which seems to be lacking in adults with substance use, because they appeared to be uninvolved about their surroundings and resist in their growth due to their impulsive acts of taking drugs.¹⁹

Positive relations includes behavior like having supportive ,warmth and close relationship and feeling of association with others.²⁰ In present study findings contradict previous literature as users showed higher mean scores on positive relations than non users. previous literature asserts that in intake of any addictive drugs individuals psychological wellbeing gets weak due to rejection of their society. Adults with substance use disorder notice negative attitude of the society towards them and the resultant attitude is one of alienation.²¹

The purpose in life of non users adults is high as compared to users. It involves feeling of commitment towards a valued goal and accept that life is significant and worthwhile, and talks about accepting own strength and weaknesses.¹⁷ A research done by Hammersley

and his colleagues on "Adolescent drug use, health and personality" related drug users' different personality and health factors for that purpose in 210 drug abusers who were studied; they concluded that there is no relationship between drug use and health but personality trait of drug abusers had an impact on their wellbeing.²² Ahlgren and Norem-hebeisen worked on self-esteem pattern of drug users in pretreatment and during treatment groups; drug abusers scored low on self-esteem in pretreatment while in post treatment they had better self-esteem and they also started to share their feelings as like normal people. It is concluded that they had low level of self acceptance before, which consequently affected their psychological well being²³.

In this study, the pattern of substance use within the adults population was explored, thus this current study highlighted the relationship between psychological wellbeing and drug used. It is concluded that psychological wellbeing of patients with substance used disorder significantly differed from normal people. It has strong clinical implications because wellbeing and drug addiction is correlated because individual become hopeless and started to take drugs when they are unable to manage their day to day activities and imagined that their surroundings are out of control. It is highly needed to work on drug abusers' wellbeing as a whole.

CONCLUSION

This study reveals that individual with substance use disorder reported lower scores on all domains of psychological wellbeing except positive relations. Strategies like educational seminars and in depth psychotherapy is necessary to relieve their burden in order to make them capable for their own life and society.

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