

Regular article

Social adjustment of family members and significant others (FSOs) of drug users[☆]

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Abstract

This study investigated the social adjustment of female family members and significant others (FSOs) of illicit drug users in order to gain insight into the impact of drug use upon those close to the user. Using the Social Adjustment Scale-Self Report (SAS-SR), we examined the social adjustment self-ratings (overall and in seven specific role areas) of 41 female partners and 24 mothers of drug users. We compared these ratings to the ratings they reported for their drug-using partners or children, to each other, and to self-ratings drawn from community comparison samples. As expected, results showed that the female FSOs reported significantly better social adjustment than the drug users in most role areas. However, their social adjustment was compromised relative to the community samples. Partners of drug users reported poorer adjustment than parents of drug users overall and in the specific areas of marital and economic functioning. Further inquiry is needed to improve our understanding of the impact of drug use on the users' family members. © 2002 Elsevier Science Inc. All rights reserved.

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1. Introduction

Systematic research with family members and significant others (FSOs) of illicit drug users is sparse, despite acknowledgment in both professional and lay literature that drug addiction affects the entire family (e.g., Al-Anon,

1971; Gold, 1993; Wolock & Magura, 1996). Much of what we know about the FSOs of substance users is generalized from studies on alcoholism, even though there are differences between the use of alcohol and that of illicit drugs that might alter the impact of the drug use upon the user's family (Velleman et al., 1993). An example of such differences is the higher likelihood of criminal involvement among drug users. The impact of these differences upon family members is as yet unknown.

FSOs of alcoholics have been found to experience unique and extensive physical, behavioral, and psychological problems (Moos & Moos, 1984). These include increased prevalence of illness and domestic violence, deterioration of the relationship with the drinker, reduced family cohesion, increased interpersonal conflict and stress, and decreased psychological and social adjustment (Billings, Kessler, Gomberg, & Weiner, 1979; Cronkite & Moos, 1980; Filstead, 1981; Finney, Moos, Cronkite, & Gamble, 1983; Fitzgerald, Davies, Zucker, & Klinger, 1994; Haver & Jacob, 1997; Hirschfeld, Kosier, Keller, Lavori, & Endicott, 1989; Jacob, Krahn, & Leonard, 1991; James & Goldman, 1971; Montgomery & Johnson, 1992; Moos, Bromet, Tsu,

[☆] Editor's Note: We assure readers that all articles published in the *Journal of Substance Abuse Treatment* have been reviewed by experienced, impartial reviewers. To obtain the most candid and constructive critiques, we assure reviewers that their identities will not be revealed to authors. In the case of this article—one involving the Editor-in-Chief of *JSAT* and close colleagues—Barry S. Brown, Ph.D., Associate Executive Editor of *JSAT*, handled the review process and has kept reviewers anonymous. Anonymous review will continue to be the policy of *JSAT*, and all such articles involving the Editor-in-Chief of *JSAT*—or close colleagues of the Editor-in-Chief—will be subject to this policy and procedure. We acknowledge Dr. Brown and thank him for his efforts to improve the integrity and quality of review for the journal.

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& Moos, 1979; Moos, Finney, & Gamble, 1982; O'Farrell & Birchler, 1987; Orford, Oppenheimer, Egert, Hensman, & Guthrie, 1976; Zweben, 1986). There is some evidence to suggest a similar detrimental impact of other substance abuse upon familial functioning (Friedmann et al., 1997). Research with alcoholics suggests that the level of impact upon the family varies according to the coping ability of the nonalcoholic family member, the extent of outside stressors, and the degree of the alcoholic family member's pathology (Moos & Moos, 1984).

There are fairly clear links between parental alcohol and other substance abuse and myriad types of individual impairment in children (Orenstein & Ullman, 1996; Velleman, 1996; Wolock & Magura, 1996). Further, real, or perceived differences in the social support provided by other adults in homes where a parent engages in alcohol or drug abuse may have a profound impact upon the developmental outcomes that such children experience (Griffin & Amodeo, 1998; Orenstein & Ullman, 1996; Velleman, 1996).

In addition to substance abuse causing a general deterioration of family functioning and having a direct negative impact upon children, there is preliminary evidence drawn from research conducted with spouses or significant others of alcoholics to support the inference that these spouses and significant others experience individual impairment in overall functioning relative to control participants (Moos, Finney, & Gamble, 1982). This impairment appears to be alleviated when the substance-abusing spouse or significant other succeeds in treatment (Moos & Moos, 1984; Preli, Protinsky, & Cross, 1990). Of course, many people with substance-abuse problems either never receive treatment or do not experience treatment success.

If FSOs of drug users suffer impairment in life areas not directly associated with the drug user, then it is likely that these individuals need assistance in their own right. Also, recent conceptualizations suggest that the impact of drug abuse is interactive. Drug abuse affects FSOs, and the FSOs' responses may in turn affect the drug users. Thus, there may be a need to develop treatments to assist FSOs with adjustment problems in addition to improving more traditional treatment of drug users. In order to determine if such treatments are needed, we require reliable and valid information on the nature and extent of the impairment of FSOs.

While evidence of psychological and family functioning problems has been based on standardized instruments with known reliability and validity, studies of the social adjustment of FSOs of alcoholics generally have not utilized well-known, standardized measures. Some of the best-controlled research examining the social adjustment of spouses of alcoholics was conducted by Moos and colleagues in the early 1980s (Finney et al., 1983; Moos et al., 1982; Moos & Moos, 1984). This research compared spouses of recovered alcoholics, relapsed alcoholics, and community controls on a variety of psychological, family, and social functioning factors. These studies suggested that spouses of relapsed

alcoholics had impaired social functioning compared to spouses of recovered alcoholics and community controls. However, social functioning was not the primary focus of these studies, and none used a consistent, standardized, or comprehensive measure of social functioning.

This study expands on the research examining the social functioning of family members of drug users in two ways. First, we used a consistent, standardized, and comprehensive measure of social functioning that examines functioning not only within the family unit, but also in role areas outside of the immediate family (e.g., work, social/leisure, and extended family areas). Second, we focused on the less frequently studied FSOs of illicit drug users.

Three comparisons were made. First, we compared FSOs' report of their own social adjustment to their report of the drug users' social adjustment. The purpose of this comparison was to check for conceptual consistency within the present study by confirming that the social functioning of the drug users would be more impaired than that of the FSOs.

Second, we compared the social adjustment of FSOs who were parents of drug users to that of FSOs who were spouses or partners of drug users to see if type of relationship with the drug user might differentially influence social adjustment problems overall and in seven different role areas: work, social/leisure activities, relationship to extended family, parenting, marital relationship, family unit, and economic independence. We hypothesized that functioning in the social/leisure, marital, family unit, and economic areas would be more interdependent when the FSO was a partner of the drug user than when she was a parent, and, therefore, that partners of drug users would have poorer social functioning than parents in these areas and overall.

Finally, we wanted to determine whether the FSOs' social adjustment differed from that of community comparison samples, overall and in three role areas (i.e., work, social/leisure, and extended family) for which acceptable comparison data were available.

2. Materials and methods

2.1. Participants

Participants were individuals who responded to and qualified for two studies (Garvey, 2000; Kirby, Marlowe, Festinger, Garvey, & LaMonaca, 1999) that examined the effectiveness of a counseling intervention for concerned significant others of drug users. They were recruited through advertisements offering free treatment. To qualify for the treatment study, FSOs had to be at least 18 years of age, have known the drug user for at least 6 months, and not have a current illicit drug-use problem themselves. We required that the drug use of concern include a drug other than alcohol, but did not exclude participants if the drug user had a concurrent alcohol problem. One hundred individuals responded to the advertisements over a period of 16 months. Seventy of these

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