



TO THINE OWN SELF BE TRUE: SELF-CONCEPT AND MOTIVATION FOR ABSTINENCE AMONG SUBSTANCE ABUSERS

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Abstract — Individuals approved for public-sector addiction treatment were interviewed regarding their reasons for attempting abstinence. Follow-up interviews were completed 3 to 6 months after participants' removal from county-controlled treatment wait-lists. Rates of continuous self-reported abstinence for 90 days preceding follow-up were positively associated with motivation linked to discrepancies between substance use and self-standards. Characteristics associated with high identity-linked motivation were cocaine preference, a history of reducing self-dissatisfaction through substance use, low rewards and high costs associated with using, and low support for the user identity among significant others. The perception of discrepancies between substance use and self-standards was an effective motivator of abstinence even among those who reported previous use of substances to dampen self-dissatisfaction. © 2000 Elsevier Science Ltd.

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What a man does and how he lives in his head are two different things. (Swift, 1996, p. 38)

The addiction literature has devoted considerable attention to the topic of motivation and its association with behavior change (Donovan & Rosengren, 1999). Motivational interviewing, a brief therapeutic approach with a specific focus—increasing clients' motivation to change—has produced outcomes similar in magnitude and duration to those achieved by longer treatments with multiple foci (Miller, 1998). Although the techniques of motivational interviewing are well articulated (Miller & Rollnick, 1991), less is known about the dimensions of motivation or about comparative rates of success among individuals motivated by different factors. One area of potentially fruitful inquiry is the role of self-concept in motivating reductions in substance use.

Researchers have reported the importance of self-concept to addictive behavior at many levels: its role in substance use initiation (Anderson, 1998a, 1998b, 1998c; Steele, Southwick, & Critchlow, 1981); its transformation during the evolving “career” of an addict (Edwards, 1984); its potential role in behavior change (Avants, Margolin, & Singer, 1994; Draycott & Dabbs, 1998; Littrell & Magel, 1991); its transformation during recovery (Klingemann, 1991); and its connection to transitions between lapse and relapse (Marlatt & Gordon, 1985).

Miller and C'deBaca's descriptive study of “quantum change” (1994) noted examples of immediate and lasting behavior modification following dramatic internal conf-

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rontations between individuals' core values, self-concepts, and behavior. Less striking, but no less illustrative of the link between self-concept and behavior change, was a study by Weisz (1996), documenting an association between identity-related motivation for abstinence and subsequent success with substance abuse treatment. Empirical findings supporting the importance of self-concept to changes in addictive behavior have been based on several social psychological theories, each hypothesizing specific mechanisms that influence change. Three traditions—cognitive dissonance theory, self-discrepancy theory, and identity theory—have particular relevance for this article.

Cognitive dissonance researchers demonstrated that in the presence of cognitive inconsistencies that threaten self-concept, individuals often eliminate previous behaviors or adopt specific behaviors to reduce dissonance. For example, individuals may discontinue an activity that appears hypocritical when compared with expressed attitudes (Dickerson, Thibodeau, Aronson, & Miller, 1992; Fried & Aronson, 1995; Kantola, Syme, & Campbell, 1984; Sherman & Gorkin, 1980; Stone, Aronson, Crain, Winslow, & Fried, 1994; Stone, Wiegand, Cooper, & Aronson, 1997). Alternatively, they may use psychoactive substances to blur recognition of self-concept-threatening inconsistencies (Steele et al., 1981). Among the factors that have been associated with individuals' choices between alternative modes of dissonance reduction are the relative salience of alternative methods and the relative ease with which they can be applied (Stone et al., 1997). Eastman and Norris (1982), for example, found that among alcoholics undergoing abstinence-oriented treatment, those who had historically experienced increased self-esteem while drinking were less successful with abstinence (30%) than were those whose self-esteem had historically decreased while drinking (97%). For those who expected drinking to yield immediate—even if temporary—increases in self-esteem, the resumption of drinking represented an easy, salient, and effective method for reducing dissatisfaction with self.

In a tradition related to cognitive dissonance, Higgins' self-discrepancy theory (1987) postulated three domains of self: the self-concept or "actual self," representing an individual's current characteristics, and two self-guides—the "ideal self," representing hopes and aspirations, and the "ought self," representing duty and responsibility. Higgins suggested that individuals are generally motivated to match self-concept to self-guides, with depression or dejection-related symptoms resulting from chronic unresolved discrepancies between actual and ideal domains, and anxiety symptoms resulting from discrepancies between actual and ought.

Empirical studies of substance use have suggested the relevance of Higgins' theories, both in identifying self-discrepancy as a characteristic of substance abusers and in articulating the motivational potential of self-discrepancies for behavior change. For example, Avants, Singer, and Margolin (1993–1994) found an association between high actual-ideal self-discrepancies and the high level of depression that has been documented among cocaine abusers. With regard to the association between self-discrepancy and behavior change, Barnett, Far, Mauss, and Miller (1996) reported changes in drinking behavior following college students' recognition of discrepancies between their own drinking levels (i.e., their actual selves) and the alcohol-use attitudes or behavior of important others (i.e., their ought selves). Bitonti's study of self-esteem in women (1992), although not dealing specifically with substance abuse, noted both the extensive documentation of low self-esteem in women and the link between individuals' self-esteem and their comparisons of self-in-the-moment with ideal self-concepts. Added to this is Anderson's observation (1998a) of the greater consistency between the user/addict identity and masculine, as opposed to feminine, "identity scripts."

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