

Social Support Problem Solving and Self Esteem among Individuals with Alcohol Dependence Syndrome

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ABSTRACT

Introduction: Regular alcohol drinking or dependence is changing the individual's personal, social, occupational, marital, physical and mental health. Alcohol dependence is a major problem worldwide; India is not an exception. Family members' negative responses to the alcoholic's behaviour usually reinforce the individual's alienation and dependency resulting from alcoholism. There are a number of social factors identified as leading factors for the relapse and re-admission such as family conflict and peers pressure which attracts the high attention of mental health professionals including psychiatric social workers.

Aim: The aim of the study was to assess and find out the association between social support, problem solving ability and self esteem among individual with the alcohol dependence syndrome. **Method and Materials:** It is a hospital based cross-sectional study. Total 40 participants were selected purposefully for the study from inpatient and outpatient department of the RINPAS, Ranchi. Socio demographic details, social support, the problem solving and self esteem of the individuals with alcohol dependence syndrome were assessed.

Result and Conclusion: There was a significant correlation between social support, problem solving ability and self esteem among individual with the alcohol dependence syndrome which important bearing on treatment and rehabilitation of these population.

Keywords: Social support, problem solving ability, self esteem


INTRODUCTION

The word "alcohol" came from the Arabic "Alkuhl" meaning essence. A proposed definition of alcohol use is a "primary chronic disease with genetic, psychological and environmental factors influencing its development and its manifestation. The disease is often progressive and fatal. Its components are poor self control to

drinking, preoccupation with use of alcohol and distortion in thinking".^[1]

Alcohol dependence is group of physiological, behavioural and cognitive and social or environmental factor in which use of alcohol take on much higher priority for a given individual than other behaviours that once has greater value, a strong need to compulsion

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to drink or strong desire, not able to stop drinking behaviour, physically misbalance without taking alcohol such as sweating, hand tremor, sickness, anxiety, headache etc., the need for increased amounts of alcohol in order to feel its effects or high. A person suffering from alcohol dependence syndrome will continue to drink despite the consequences such as loss of job or health problems, family problem, sexual problem, psychological problem and environmental problem.^[2]

Alcohol Dependence in some form has been a universal phenomenon and has eventually become a human tragedy resulting in enormous toll in deaths, more crime and accident, marital disharmony, interpersonal disturbances and maladjustment at home and work place.^[3] Alcoholism does not only affect the individual but the whole family. Spouses of such individual have varied psycho socioeconomic stress and strain resulting from alcoholism, both alarming and grim. Adjustment of spouses also gets negatively affected. Alcohol consumption occurs along a continuum, with considerable variability in drinking patterns among individuals. There is no sharp demarcation between "social or "moderate", drinking and "problem" or "harmful" drinking.^[4] It is clear, however, that is regular alcohol drinking gradually improve intoxication due to face physical, psychological and social problems.^[5]

Alcohol drinking regularly or dependence is changing the individual's personal, social, occupational, marital and physical and mental health.^[6] Indian epidemiological studies suggested that 20 to 30% of the population is consuming alcohol more than physical and mental capacity.

The study commented that alcohol dependence is a worldwide problem including India. Social Support systems help the people coming together with his physical strength and psychological individual proprietor of emotional burden divide his tasks and they provide each other materials, tools, skills, and educate to stand and cope with the situation.^[7]

Problem solving ability means to relationally thing and resolve quarry understanding issue, kind of issue and nature things happened with individuals feel treble in his life so that generally thing about have to solve treble or find out a solution. Self esteem is the person's think and acts appropriately in there varies condition in the

community also dignity, worth and personal value.^[8] A good Support system or better social network system is very much essential for an individual who enter for intervention, it is essential for an individual to have supportive social system,^[9] Alcohol dependent treatment and treatment relapse have relationship with social support in the family, friends and other relatives is the impact of alcohol problem on the various dimensions that comprise family functioning is revealed. Similarly found that individual with alcohol dependence spouses has dissatisfaction of the marital and social life.^[10]

Social support is being recognized emotional, instrumental, informational, and appraisal.^[11] Social supports have a positive influence on health. It may influence motivation, treatment compliance and outcome in alcohol dependent patients. The overall family functioning is unhealthy, leadership is stop-gap or highly indecisive filled by another member, reinforcement is through coercion or punishment, common family goals are absent with poor concern towards each other including inadequate support system,^[12] Family members' negative responses to the alcoholic's behaviour usually reinforce the individual's alienation and dependency resulting from alcoholism.

Social factors identified as leading factors for the relapse and re-admission because of emotional comfort and physical assistance that an individual does not receive from other people and family member.^[13] Psychological and psychosocial factors like the urge to take alcohol, family conflict and peers group pressure were major reasons for relapse and readmission. Families have had to assume the role of primary caregiver and source of support for their mentally ill relative, at least some of the time. A Recent estimate indicates that between one third and two third of persons with long term psychiatric disabilities reside with family members and many more remains in close contact with relatives. This has represented both an enormous burden and a significant adaptive challenge for many families. Several studies documented that families of persons with mental illness are significantly affected by the responsibility of their care giving role.^[14,15]

The study suggests problem solving ability or problem solving skill improve decision making and coping

pattern of individual it was trigger good self esteem.^[16] It is the benefit for controlling aggression and assertiveness which helpful for psychosocial treatment and relapse prevention. Low self esteem is increased drinking pattern and also high self esteem individuals may be taken occasional drinks. Levels of self-esteem affected on alcohol drinking pattern and substance using problem.^[17]

AIM OF THE STUDY

The aim of the study was to assess and to find out the association between social support, problem solving ability and self esteem among individual with the alcohol dependence syndrome.

METHOD AND MATERIALS

It was a hospital based cross-sectional study. Total 40 male participants between 18-45 years of age who were given written informed consent were selected for the study through purposive sampling technique. Individuals with a history of multiple substances use, major physical problems (HIV and AIDS, cancer, etc.) neurological disorder and mental retardation were excluded. Self prepared Socio-demographic data sheet, PGI Social Support Questionnaire,^[18] a four point 18 item Likert scale where high score shows good social supports and low score shows poor social support, the Problem Solving Inventory,^[19] a six point Likert scale with 35 items where high score shows good problem solving ability and low score show poor problem solving ability and Rosenberg Self Esteem Scale,^[20] a ten item four points Likert scale where high score means good self esteem and low score means poor self esteem, were used to assess the participants. Individuals with alcohol dependence syndrome as per ICD-10 Diagnostic Criteria for Research[2] from inpatient and outpatient department of Ranchi Institute of Neuro-Psychiatry and Allied Sciences, Ranchi India. The analysis was done use of Statistical package for social sciences (SPSS-16).

RESULT AND DISCUSSION

Table 1 shows the socio-demographic detail showed that mean age of persons with the alcohol dependence syndrome were 31.05±7.30. The mean of family income per month was 15030 ±13969, the mean of the age of onset was 22.30±6.15, mean of the duration of the alcohol dependence syndrome were 8.70±6.15 and mean the number of hospitalization were 1.45±4.00.

Table 1
A Socio-demographic Variable

Item	Mean	Standard Deviation
Age	31.05	7.309
Family income monthly (Rs.)	15037.50	13969.92
Age of onset	22.30	6.35
Duration of Alcohol dependent	8.70	6.15
Number of Hospitalization	1.45	4.00

Table 1 B
Socio-demographic Variables

Item	Category	Frequency	%
Education	Illiterate	6	15.0
	Primary	5	12.5
	Secondary	13	32.5
	H.Secondary	5	12.5
	Graduation	10	25.0
	PG & above	1	2.5
Occupation	Farmer	6	15.0
	Business	5	12.5
	Govt Service	2	5.0
	Private job	18	45.0
	Daily ways	1	2.5
	Unemployed	8	20.0
Category	General	26	65.0
	OBC/OMBC	6	15.0
	ST	8	20.0
Marital Status	Single	12	30.0
	Married	27	67.5
	Widower/	1	2.5
Family type	Nuclear	25	62.5
	Joint	15	37.5
Domicile	Rural	13	32.5
	Semi -Urban	10	25.0
	Urban	17	42.5
Religion	Hindu	24	60.0
	Islam	10	25.0
	Sarna	2	5.0
	Christian	4	10.0
Family history	Yes	10	25.0
	No	30	75.0

Table 1B shows the socio-demographic detail showed that the majority of the population is educated up to secondary 32.5%, followed by up to graduation (25%). The majority (45%) of population are working at private sector job and rest 2.5% populations are done daily wages. Most of the population belonging to general category 65% followed by tribal populations is 20% and other backward class category populations 15%. In the study population, 67.5% populations married. Majority (62.5%) population live in the nuclear family and 37.5% populations are live joint family. 42.5% populations are urban background. The majority (60%) of the population belongs to Hindu religion. Three-fourth (75%) study population has no family history of alcohol dependents syndrome and 25% population have a family history of the alcohol dependence syndrome.

Table 2 shows the score obtained by the individuals with alcohol dependent on social support is 43.80 ± 5.57 , on problem solving ability is 102.95 ± 19.00 and the score on the self esteem of the alcohol dependent individuals is 12.22 ± 5.42 . That it was show treatment taking alcohol dependent individual have average primary and tertiary social support (from family members, friends and hospitals or service giving Government and Nongovernment originations) and normal problem solving ability and their self esteem was normal.

Table 2
Mean Score on different variables

Variables	Mean	Std. Deviation
Social support	43.80	5.78
Problem solving	102.95	19.00
Self esteem	12.22	5.42

From Table 3 There are significant positive co-relation found between problem solving ability and self esteem (0.507 at $p < 0.01$) which indicates that if problem solving ability is high then self esteem is also high. There is a

Table 3
Correlation of Variables

Variable	Self Esteem	Problem Solving	Social Support
Self Esteem	1		.241
Problem Solving	.507 **	1	
Social Support	.241	.411 **	1

significant positive correlation found between social support and problem solving ability ($r = 0.411$ at $p < 0.01$). It shows that if social support is good then problem solving ability is high.

DISCUSSION

The present study shows that individuals with alcohol dependence seeking treatment found more from urban areas; they were having higher education and most of them living in the nuclear family system. This finding is consistent with the study conducted on alcohol treatment seeking people has higher income source and a large number of them taken treatment from an urban background.^[21]

The present study shows that there is a positive correlation between problem solving ability and self-esteem of the individuals with alcohol dependence syndrome. A study^[17] also found that self-esteem was highly associated with the self-esteem of the individuals with alcohol dependence syndrome. According to this study poor self-esteem increased the problem of alcohol dependence.

The present study finding shows that social support was positively correlated with social support and problem solving ability. It was seen that individual with alcohol dependence who have good social support enhances their problem solving ability which may be seen in improvement in their understanding and decision making ability and it helps in their psycho-social treatment and relapse prevention. Similar findings were reported in a study^[22] that say social support was associated with problem of alcohol dependence. This study also supported our study that poor social support creates the problem of alcohol dependence, another study^[23] also reported an association between problem solving ability and social support. It's indicating that good social support increased problem solving ability.

There is dearth of studies in this particular area but few studies like reported that specific situations or mood states are associated with relapse, including negative emotional states (e.g. frustration, anger, anxiety, depression); interpersonal conflict (e.g. relationships with partner, work colleagues, friends); and direct or indirect social pressure to drink.^[24,25] This supported negative self esteem and problem solving ability

associated with each other and poor self esteem has increased alcohol taking behaviour.

A Study^[26] supports finding of the present study which suggested that when social support became stronger then problem solving ability increased and drinking pattern was decreased. A similar finding was reported in another study which found that social support was strongly associated with alcoholic habit, if social support was strong then drinking habit also decreased.^[15]

LIMITATIONS

It was a time bound purposive sampling based on a small sample and single centre study so generalization of results would be limited. The treatment techniques and family members were not involved in this study. So any future community based intervention study with larger sample size including both genders can address the issues in a more effective manner.

CONCLUSIONS

The present study finding suggested if social support increased then problem solving ability also increased and problem solving ability was strongly associated with self-esteem.

The present study highlighted the scope to work for psychiatric social worker in alcohol treatment since social support is a major area of work.

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