

## Impact of Family Support Group on Co-Dependent Behaviour

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**Abstract:** The present study aimed to investigate the impact of family support group on co-dependent behaviour of spouse of drug addicts. It was hypothesized there would be significant difference between new and old members of family support group on co-dependent behaviour. It was also hypothesized that new members will score higher on denial, self-esteem, control and compliance as compare to old members. A sample (N=60) female spouse acquired through addiction treatment Centre's of Lahore city. The data was collected through purposive sampling technique. Am I Co-dependent Scale was administered to measure co-dependant behaviour. Independent sample t- test was used to find out the difference of co-dependent behaviour. Results shows that there is significant difference between new members and old family support members on variables. Findings can be implemented to enhance the benefits of self-help groups or group therapies supported by drug treatment centres to family members.

**Keywords:** Co-dependent behaviour, compliance, control, denial, family support groups, self-esteem, spouse of drug addicts

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### I. Introduction

Among various psychosocial aspects of drug addiction treatment and rehabilitation, family plays most significant role. Addiction has devastating effects. These effects are not only limited to drug addicts but also it disrupt the entire family system of value and personal relationships. Mostly sufferings of family members are overlooked due to patient-centred treatment approach.<sup>[1]</sup> Usually any of the chronic illness could be the cause to bring the family together or to loosen its ties. Addiction is frequently referred to as a family issue for the reason that nonentity (the parents, siblings, spouse and children) is invulnerable. Addiction threatens the entire structure of the family and even changes everything about the family.<sup>[2]</sup>

The impact of addiction on family members varies in degree depending on the roles they play in the family and the responsibilities they carry. Yet addiction touches all their lives. Predominantly, the spouse of addicts faces the troubles from all directions. The crucial problems of spouse is her anxiousness about her husband's (addict) health, job insecurity, embarrassment and guiltiness all these take a profound toll on her physical and emotional well-being. The spouse of addicts tries everything from pleading to advising but all in vain. The main reason is that the family struggles to maintain its stability with a series of adjustments. Yet the process is so insidious and gradual that family members do not even observe the extent to which they stretch themselves to cope.<sup>[3]</sup> Usually the spouse blames herself or tries to be a perfect wife, or sometimes blames others. All the time she looks confuse, cursing vehemently and display emotionally pathogenic attitude toward her husband and ultimately she herself become co-dependent by adopting the behavioural and emotional misbalance of their partner such as remain loyal to the care and support of their spouse in the face of callous social and emotional difficulties. It is because there is definite shift in the way the family thinks acts and expresses feelings. The pessimistic but recognizable behaviour of responding to each is well-established and often the family is not even mindful of it so resultantly co-dependency occurs.<sup>[4]</sup>

Co-dependency occurs when two people form a relationship with each other.<sup>[5]</sup> Co-dependent person is one who has permit another person's behaviour impinge on him or her and is obsessed or possessed with controlling that person's behaviour.<sup>[6,2]</sup> Dear (2009), label co-dependency as a kind of addiction.<sup>[7]</sup> Dysfunction within the family of an addict was found to be the leading cause of addiction and relapse.<sup>[8,9]</sup> Co-dependency is considered or well thought out as an unhealthy pattern of coping. Consequences of co-dependency in marital adjustment with children and others appeared in devastating effects. For example, children see the mother exhibiting dysfunctional behaviour in spite of not taking drugs. In this way they are lacking the right role model at home.<sup>[4]</sup>

Denial, Self-esteem, Compliance and Control are known as crucial factors of co-dependency. These factors are shared by addicts and their spouse as well. Denial refers to the course by which people act as that they do not have an addiction while in reality they have.<sup>[10]</sup> Denial is one of the leading symptoms. Spouses and significant others may deny that there is a problem, even though the destruction all around them is obvious. Dysfunctional families often spoil each other through their denial.

Mental health issues, such as anxiety or depression, may stem directly from the effect of denial on the family and moreover spoil the self-worth that destroy the second major factor of co-dependency known as self-esteem.<sup>[11]</sup> Having low self-esteem spouse of drug addict comply the demand instead their own need and they suppressed their own wishes. This factor is labelled as compliance. Similarly after compliance, the addict depends upon drug and exhibit anxiousness. The family members without taking the drug is equally anxious with addict's behaviour. This shows the misbalance of the fourth important factor of co-dependency known as controlling.

There are various strategies applied in various family therapy models. In Pakistan, drug treatment centres are offering family therapy or family support groups. Family Support groups play a vital role to halt the particular co-dependent factor that promote various behavioural problems. Family support group includes the parents, siblings, spouse, and children. They considered as a back bone for families struggling for decreasing the addictive behaviour. The main focus in current research is adjoining one which is female spouse. major proportion of drug addicts in Pakistan consist of male addicts (9% female of total proportion, UNDCP, 2013).<sup>[12]</sup> It is an effort to explore the connection between the direct impact of family support group attendance and the reduction of co-dependent behaviours. Family support is found to be involved in helping to recover or eliminate dysfunctional addictive behaviour.<sup>[13,14]</sup>

Many studies focused specifically on the role of family support group and its impact in decreasing or increasing the addictive behaviour. A study reveals that the family and friends may help in solving problems.<sup>[15]</sup> Both physical and psychological help provided by the support group prove beneficial in times of stress, and it is valuable in spite of the kind of coping strategy that are used.<sup>[16]</sup> The family is considered very central for the betterment of drug dependent person's life. They very much involved with numerous aspects of the addiction. Their responses to the dependent person influence on the course of addiction and as well as in treatment, aftercare, which may either aid to recover or precipitate to relapse.<sup>[17]</sup> A research conducted in United States to explore the connection between recovery and community. Recently, the development and mobilization of community channels to support the prolong recovery of families are acknowledged.<sup>[18]</sup>

Comer (2012), noted that after providing intensive treatment, the addicts again relapse to the addictive behaviour.<sup>[19]</sup> This research is carried out with the focus that by counselling or altering the co-dependent behaviour of the family or particularly of spouse will considerably bring a healing or recovering impact in drug addicts existing behaviour.

## **II. Objectives**

The aim is the study to investigate the impact of family support group on co-dependency of spouse of drug addict. Generally it is considered that the treatment of drug addict is enough for his adjustment. Thus, family members or spouse of drug addicts do not participate in self- help programs to overcome their behavioural problems or misconceptions. The basic aim and objective of current study is to investigate that how attending the support group influence on the co-dependency.

## **III. Hypotheses**

After reviewing literature it was hypothesized that

1. There would be significant difference between new and old members of family support group on co-dependent behaviour.
2. New members of family support group will score higher on denial, self- esteem, control and compliance as compare to old members.

## **IV. Methodology**

### **4.1 Participants**

Comparative research design was used to investigate the difference of co-dependent behaviour between new and old members of family support group. The sample consisted of female spouse of drug addicts (N=60). There were member of family support group who joined the group for first time (N=30) and those members who were attending the group for last 20 weeks (N=30). The sample was taken from different drug treatment centres of the Lahore city through purposive sampling technique. Age range of participant was from 18-50 years and their minimal education level was primary because the questionnaire was translated into Urdu and the participant whose education was less than primary cannot understand it. They belonged to middle socio economic status. Female spouse were approached because drug treatment centres in Pakistan are providing inpatient treatment to male drug addicts mainly. In order to maintain the uniformity in treatment method, only Family support group intervention was included.

### 4.2 Measures

Am I a Co-dependent Scale<sup>[6]</sup> was used to measure co-dependent behaviour. There are 23 items in this scale. There are four subscale namely denial (4 items), self- esteem (6 items), compliance (6 items) and control (7 items). Scale has three response categories, yes, no and sometimes, respectively. Three or more response in yes, suggests co-dependency. Standard procedure of translation and back translation was adapted. Before achieving the main objectives of the study, reliability of the scales were calculated to check the homogeneity of the scale in Pakistani cultures. After translating the test into Urdu, reliability of the scale was calculated using chronbach alpha (that was 0.80). The Coefficient for scale is in the acceptance range, and this shows that the scale being employed in this study is reliable instrument for measurement of the constructs of interest.

### 4.3 Procedure

Permission from was sought from the authority of Addiction Treatment centres of Lahore. The consent form was given to the family support group members and the nature of the study was explained to the participants before administration of the questionnaires. Participants were ensured that the information acquired from them will be held confidential and was not be used for any other purpose other than this research. Participants were provided necessary directions about assessment in order to reduce their anxious feelings. Participants were required to make choice on am I co-dependent scales according to their personality. SPSS 17.0 was used for analysing, organizing, and interpreting the data. Descriptive and inferential statistics was used. Mean and standard deviation was calculated. To determine the significance of difference on co-dependent behaviour, denial, low self-esteem, control and compliance between new and old members t-test was applied.

## V. Results and Discussion

**Table 1**

Independent Sample t-Test for Co-dependency Scores in New and Old members of family support Group (N = 60)					
Group	n	M	SD	t	p*
New Members	30	19.80	1.750	27.912	.000
Old Members	30	6.73	1.870		

df=58, p\* < .01.

**Table 2**

Independent Sample t-Test for Denial, Self-esteem, Control and Compliance Scores in New and Old members of family support Group (N = 60)						
Scales	Group	n	M	SD	t	p*
Denial	New	30	3.60	0.498	12.464	.000
	Old	30	1.60	0.724		
Self-esteem	New	30	5.47	0.507	21.878	.000
	Old	30	1.73	0.785		
Control	New	30	5.80	0.925	19.290	.000
	Old	30	1.73	0.691		
Compliance	New	30	4.93	0.691	19.453	.000
	Old	30	1.67	0.606		

df = 58, p\* < .01

SPSS (statistical package for social sciences) version 17.0 was used to analyze data. Descriptive statistics was used to calculate mean and standard deviation. The result indicated (Table 1) that there is a significant [N = 60, t= -27.912\*, p <.01] difference between new and old family support group members on co-dependent behavior. Results also showed that new members of family support group score significantly [t=12.46; 21.878; 19.290; 19.453, p <.01] higher on the variables of denial, low self-esteem, control and compliance respectively as compare to old members. The hypothesis has supported (Table 2).

The present study was conducted to investigate the impact of family support groups. In order to measure the impact, it was hypothesized that there will be significant difference on co-dependent behaviour between new and old members of family support group. The results indicate that there is significant difference on co-dependent behaviour, denial, low self-esteem, control and compliance between new members and those who have attended group meeting for 20 weeks.

Results of the present study show that there is significant difference between new members of family support group and old members on co-dependent behaviours. New members score high on the variables of denial, self-esteem, compliance and control as well. The result is consistent with previous studies study of Asher and Brisset (1998) which suggested that spouses under the influence of co-dependent person tend to act more aggressively and to cover up their inner feelings or to deny the reality.<sup>[20]</sup> Results also confirms that those spouse attend family interventions remain more supportive for the abstinence of their partner because of reduction in co-dependent behaviour.<sup>[14]</sup>

The result is in according with pervious study suggested that addiction also has negative effects on the spouse of addict. The spouse may have psychological problems for example, feelings of hatred, self-pity, and avoidance of social contacts. All these factors lead towards the development of low self- esteem. Present study proven the previous researches which result showed that women whose partners had addiction problems experienced victimization, injury, mood disorders, anxiety disorders, and being in fair or poor health.<sup>[9,21,22]</sup> They also experienced more life stressors and had lower mental psychological quality-of-life scores then normal couples. Thus new members of family support group scored higher on denial, low self-esteem, compliance and controlling behaviours.

As for as compliance is concerned, spouse of drug addicts not only face psychological problems but they also comply with their mood fluctuation. Additionally have labile personality and they have to comply with their demand. Present study proven the previous researches which result showed that women whose partners had addictive problems experienced victimization, injury, mood disorders, anxiety disorders, and being in fair or poor health.<sup>[21]</sup> They also experienced more life stressors and had lower mental psychological quality-of-life scores then normal couples.

## VI. Conclusion

Present study has some limitations like small sample size, non-probability sampling technique and less opportunities of self-help groups for families from treatment centers. For future study other family members e.g., children, parents and sibling can be included to study the vast effects of self-help groups on family members. Professional engage in the treatment of drug addicts and family members of drug addicts can be benefited by the findings. Results provide a renewal of hope that treatment works and support of family can be beneficial not only for the drug addict but also for self-awareness.

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