

Abstract

Objective: The aim of this study was to investigate the effect of group training of substance abuse complications on female high school students' attitudes with an addicted parent in Sheshtamad (Sabzevar). **Method:** A quasi-experimental research design along with pretest-posttest and control group was used for the conduct of this study. The number of 84 female high school students with one addicted parent in Sheshtamad city in 2015 constituted the statistical population of this study. From among this population, 60 participants were selected through random sampling method and were randomly divided into control and experimental groups. The experimental group received group training program for 8 sessions and the control group received no treatment. The required data were collected through Attitude toward Addiction Questionnaire. **Results:** The results of covariance analysis showed that group training had a significant positive effect on attitude to addiction components in female students with an addicted parent ($P < 0.01$). **Conclusion:** Since group training of substance abuse complications led to the emergence of negative attitudes to addiction among female students with an addicted parent, it seems necessary to assign credit to these educational programs in high schools and universities.

Keywords: group training, attitude, addiction, female students

The Impact of Group Training of Substance Abuse Complications on Attitude to Addiction among Female High School Students with an Addicted Parent (Case Study)

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Introduction

Despite the long history of drug abuse disorders in the world, this phenomenon has currently become a serious and global problem and has negatively affected social, psychological, economic, personal, family, and political factors (Rather, Bashir, Sheikh, Amin & Zahgeer, 2013). It seems that human beings have tended to change their mental states in all cultures and times and, for this purpose, they have used narcotic and psychotropic drugs and this leads to the emergence of addiction. Addiction is one of the main problems of human life that has brought about an increasing concern for all societies (Lundholm, 2013). Substance abuse is referred to as the use of any legal, illegal or prescriptive psychotropic drugs (Gupta, Sarpal, Kumar & Kaur, 2013). Substance abuse is a chronic relapsing disorder and is associated with many issues in the areas of medicine, psychiatry, family, employment, legal affairs, financial affairs, and spiritual states. This disorder affects not only the person's life, but also creates many problems and disadvantages for the family and society and imposes many burdens upon them. Addicted parents' children experience social-psychological problems, such as depression, anxiety, social isolation, behavioral problems (Solis, Shadur, Burns & Hussong, 2012), and poor educational learning experience (Gifford, Sloan, Eldred, Evans, 2015). In general, addicted parents play a substantial role in their children's tendency to addiction (Harrington et al., 2016).

Tavolacci et al. (2013) argue that the multiplicity and interaction of addiction-related factors have created complex health problems. Research findings suggest that the increasingly negative effects of drug abuse on psychosocial functioning, quality of life, and mental health have necessitated the identification of factors influencing addiction tendency. Among these factors, personality traits, socioeconomic factors, and demographic factors play an important role in addiction tendency and drug abuse (Rather et al., 2013; Wood, Dawe & Gullo, 2013). Research has shown that the weakness of people's knowledge, low economic and social status of families (Siziya et al., 2013), and family status (Gupta, Sarpal, Kumar & Kaur, 2013) are effective in addiction tendency. Considering the decreasing age of addiction and the human and material costs of combating the supply and distribution of narcotic drugs, its physical and psychological complications, the waste of much time and money, the low percentage of success in addiction treatment, the lack of addicts' motivation for recovery, it can be claimed that the treatment of addicts does not result in a satisfactory outcome, and the effect of this treatment, without psychosocial interventions, will not bring much success (Roozen et al., 2006). On the other hand, substance abuse has caused serious social, economic, political, cultural, and health problems, including communicable diseases (hepatitis, AIDS) and psychosocial problems, such as robbery, murder, self-burn, unemployment, family violence, child abuse, divorce and educational failure of children with addicted parents (West, 2008). From among the protective factors and risk

factors for substance abuse, people's attitude is one of the most prominent factors that has attracted the attention of psychologists and sociologists (Cooper, Frone, Russel, & Muder, 2007). In this regard, one of the most important preventive measures to change attitudes towards drug abuse is to make people aware of its harmful effects. One of these awareness-raising strategies for people, especially adolescents, is education that can prevent the spread and incidence of this social phenomenon. Research has shown that positive and negative cognitive-emotional regulation strategies have a significant relationship with cigarette and hookah smoking (Kaviji et al., 2015) and addiction (Makeri Wala, 2015). Tendency is a fundamental concept in social studies. Social studies emphasize tendency as beliefs that influence the thinking, feelings, and behavior of individuals (Baron & Byrne, 1977). In other words, tendency is the combination of cognition, feelings, and potential towards the conduct of one action. Tendency refers to the individual's beliefs about the outcome and consequence of what s/he intends to do and the value s/he regards for the outcome (Bagheri & Bahrami Ehsan, 2013). It is believed that addiction tendency can affect people's perceptions and decision-making about substance abuse. People have stereotypical ideas about addicted people. Stigma, rejection, and punitive acts are the responses that are generally directed to addicts. In general, these negative responses to addicts cause the incidence of some difficulties for the addicts' recovery and return to social life (Grace, 2006).

Addicted parents do not enjoy appropriate parenting skills. Poor parental control of children's behavior, parental differences, poor quality of child-parent interactions, and unstable discipline or its absence are common in such families (Arria, Mericle, Meyers, & Winters, 2012). However, family ties, parent-child attachment, monitoring of children's behavior, effective communication, and talk about positive familial expectations and values are important protective factors against drug use (Borning et al., 2012). The clinical experiences of children show that many emotional disorders and their behavioral problems have a close relationship with the family in which they live. This is somehow related to the context and system of families and, on the other hand, is related to the specific perception of each child of his/her family (Oren, 2002). The presence of narcotic drugs at home can be an effective factor in the growth of children (Ornoy et al., 2010). Research findings have reported that children of addicted parents are at increased risk of substance abuse and that the probability of children's becoming addict in families with addicted parents is 2 to 9 times more than healthy families (Kumpfer, 2014). Parental abuse also causes children's tendency to addiction (Grella, Lovinger & Warda, 2013; Pearson, D'Lima & Kelley 2012). The results of another research showed that one of the factors influencing addiction tendency in children is parental weak awareness (Sungu, 2015), and usually the reluctance of these families for the receipt of individual or family-based therapeutic interventions makes prevention and treatment of their children difficult (Kelley, D'Lima, Henson, & Cotton, 2014). Considering

the harmful medical, social, legal, health, and economic effects of drug abuse, it is necessary to take serious action to prevent it. Researchers have presented different approaches and categorizations towards drug addiction prevention. In one type of these categorizations, addiction prevention is divided into three categories, namely comprehensive, selective, and obligatory (Younesi, & Mohammadi, 2006). In addition, several other methods of addiction prevention include life skills training program, information enhancement approach, emotional or emotion-based training, perception and social impact approach, and training program of resistance against drug abuse (Savadkoochi, Arjmand Hesabi, & Norouzi, 2006). One of the most important strategies in addiction prevention is to change positive attitudes and stabilize negative attitudes toward narcotic drugs. A large number of factors affect people's attitudes. One of these factors is the level of people's awareness and information in this field. The individuals who hold positive attitudes and beliefs toward narcotic drugs are more likely to use drugs and become addicted than those who have negative or neutral attitudes (Bagheri, & Bahrami Ehsan, 2013). In this regard, Tahmasebipoor, Nasri, & Kasiri (2016) indicated that psychosocial reinforcement programs can lead to girls' negative attitudes toward drug abuse. Akbari, Hashemi Nosrat-Abad, & Babapour Kheiroddin (2014) concluded that the style of lecture delivery, group discussion, and training package have a positive impact on male school students' awareness of substance abuse in Tabriz; of course, group discussion method was found more effective than the other two methods. Research on the area of awareness raising has shown that the application of such methods as health training, social learning, and especially the use of integrated training methods (combination of verbal, written, and educational media) can have a great impact on changing individuals' attitudes substance abuse (Espada et al., 2015). Choate (2015) indicated that interventional programs can be effective in prevention of drug use, and, due to the development of addiction, it is required that both children and parents raise their awareness of these types of training. Naemi's findings (2015) showed that family-centered training is capable of enhancing hopeful and goal-oriented thinking in women with addicted spouse by using communication skills, self-awareness, problem-solving, behavioral control, help seeking, optimism, and elimination of false beliefs, empathy, and decision-making power. In addition, family-centered training leads to the increased mental health of women with addicted spouse by changing the cognition, bringing optimism, eliminating misconceptions, and promoting resiliency.

One of the major styles of addiction prevention is awareness-raising of different groups of people about the risks and threats of substance abuse. If anybody gets aware of the adverse impact of drug use on the physical, psychological, social, and occupational functioning of him/herself and his/her family, s/he may be less likely to try it. On the other hand, the reason for the addiction of some people is their inability in dealing with difficulties and challenges in life. Unfamiliarity with appropriate coping methods results in

brittleness and, thus, seeking refuge in addiction. Therefore, the training of some skills seems essential. Considering the increasing rate of drug addiction and the decreasing age of substance abuse in Iran as well as the serious risk that threatens female students with addicted parents, it is necessary to study the impact of training interventions. Accordingly, this study seeks to answer the following question: Does group training of substance abuse complications is effective in addiction attitude among female high school students with an addicted parent?

Method

Population, sample, and sampling method

A quasi-experimental research design along with pretest-posttest and control group was used for the conduct of this study. The number of 84 female high school students with one addicted parent in Sheshtamad city in 2015 constituted the statistical population of this study. The entry criteria were the desire to take part in the study and having at least one parent addicted. After the observance of the entry criteria, from among the population, 60 participants were selected through simple random sampling method. These participants had announced the addiction of at least one of their parents in interview with school authorities and took part in the study after the achievement of their parental consent to participate in the training program. Then, they were randomly divided into control and experimental groups. First, both groups were given the pre-test. Thereafter, experimental group received eight 90-minute sessions of group training program and the control group was kept on the waiting list to participate in the program later on. One week after the completion of the training program, the post-test was administered to both groups.

Instrument

Attitude toward Addiction Questionnaire: In this research, Bahrami Ehsan's Attitude toward Addiction Questionnaire (2011) was used. This scale has 73 items and 10 components, namely general attitude towards addiction (18 items), attitude towards drug use (13 items), attitude toward the cause of drug use (8 items), attitude towards the acceptance of addicts (5 items), attitude toward the addict's personality (5 items), community attitude towards addiction (9 items), attitude towards addiction withdrawal (6 items), attitude towards the consequences of drug use (3 items), attitude towards addiction avoidance (3 items), and attitude toward choosing addiction as a solution in life (3 items). The items are scored based on a 5-point Likert scale, from strongly agree (5) to strongly disagree (1). A number of items are scored in reverse order. The internal consistency reliability of the scale has been reported equal to 0.89 (Younesi & Mohammadi, 2006) and 0.91 (Esma'eali, Tavakoli, Ghiasi, Hekmatpour & Farhadi, 2011). Its reliability in the present study was estimated equal to 0.87 by using Cronbach's alpha coefficient.

Procedure

The purpose of the group intervention was to hold training sessions about recognition of different types of substances, addiction, treatment, and the effect of the addicted person's behavior, especially parents, on other members of the family. The content of the program was based on Carroll's book, entitled *A Practical Guide to Cognitive-Behavioral Therapy of Substance Abuse*, based on training about the complications of narcotics (Carroll, translated by Roodsari, & Mohammadkhani). The process of each session included reviewing the previous assignments, direct teaching, lecture, group discussion, brainstorming, and wrap-up. The training sessions were held in the group format for students with addicted parents. A summary of the training structure of these sessions is presented in Table 1.

Table 1: Summary of the content of the training sessions

<i>Sessions</i>	<i>Content</i>
First	Familiarization, introduction, statement of the training goals and expectations, review of the members' problems, and pretest
Second	Teaching of the phenomenon of tolerance, physical side effects of drug use (facial distortions, tooth decay, lung cancer, etc.) and substance withdrawal syndrome, homework, and review of exercises
Third	Exercise review, familiarity with craving, description of physiological craving, identification of craving stimuli, and exercise
Fourth	Exercise review, identification of cognitive schema and errors by people prone to addiction through vertical arrow method, homework
Fifth	Exercise review, training about warning signs, symptomatic division and training of physical symptoms, exercise
Sixth	Exercise review, provision of more description of warning signs, training about behavioral symptoms, training about individual, family, and social complications of drug use, exercise
Seventh	Training about psychological symptoms and complications (illusion, delusion, poor self-esteem, false happiness, pessimism, etc.), preparing the group for the end of the program in the next session, exercise
Eighth	Review of the previous sessions assignments, review of the training concepts of the previous sessions, closure of the contract and the covenant

Results

The mean value of the experimental group's age was 16.8 years and the standard deviation of 0.94 years. The number of 23 participants (38.3%) were in the tenth grade, 21 (35%) of were in eleventh grade, and 16 (26.7%) were in the twelfth grade. The descriptive statistics of the components of Attitude toward Addiction Questionnaire are presented in Table 2.

Table 2: Descriptive statistics of Attitude toward Addiction Questionnaire for each group and test type

<i>Variables</i>	<i>Groups</i>	<i>Pre-test</i>		<i>Post-test</i>	
		<i>Mean</i>	<i>SD</i>	<i>Mean</i>	<i>SD</i>
General attitude	Experimental	38.00	3.10	44.00	7.00
	Control	40.00	4.30	41.00	30.00
Drug use	Experimental	29.00	2.00	35.00	4.00
	Control	29.00	2.40	30.00	2.00
Cause of drug use	Experimental	17.00	2.00	27.00	4.00
	Control	17.00	2.00	18.00	2.00
Acceptance of addicts	Experimental	11.00	2.00	17.00	2.00
	Control	10.00	1.00	10.00	1.00
Addicts' personality	Experimental	10.00	1.00	16.00	2.00
	Control	10.00	1.00	11.00	1.00
Community attitude	Experimental	20.00	2.00	30.00	3.00
	Control	20.00	2.00	21.00	1.00
Addiction withdrawal	Experimental	13.00	1.00	19.00	2.00
	Control	14.00	1.00	15.00	0.90
Consequences of addiction	Experimental	7.00	0.80	11.00	1.00
	Control	6.00	1.00	6.00	0.70
Escape from addiction	Experimental	7.00	1.00	10.00	1.00
	Control	7.00	1.00	7.00	1.00
Addiction as a solution	Experimental	7.00	1.00	10.00	1.00
	Control	6.00	1.00	7.00	1.00

Kolmogorov–Smirnov test was run to check the normal distribution of variables whose results are presented in Table 3.

Table 3: Results of Kolmogorov-Smirnov test representing the state of normal distribution of variables

<i>Variables</i>	<i>Z</i>	<i>Sig.</i>	<i>Variables</i>	<i>Z</i>	<i>Sig.</i>
General attitude	0.63	P>0.05	Drug use	0.85	P>0.05
Cause of drug use	0.43	P>0.05	Acceptance of addicts	0.93	P>0.05
Addicts' personality	0.78	P>0.05	Community attitude	0.97	P>0.05
Addiction withdrawal	0.91	P>0.05	Consequences of addiction	1.09	P>0.05
Escape from addiction	0.99	P>0.05	Addiction as a solution	0.43	P>0.05

To check the homogeneity of variances, Levene's test was used and its results are presented in Table 4.

Table 4: Levene's test results investigating the homogeneity of variables in variables

<i>Variables</i>	<i>F</i>	<i>Sig.</i>	<i>Variables</i>	<i>F</i>	<i>Sig.</i>
General attitude	0.67	P>0.05	Drug use	0.005	P>0.05
Cause of drug use	0.33	P>0.05	Acceptance of addicts	0.03	P>0.05
Addicts' personality	0.05	P>0.05	Community attitude	0.02	P>0.05
Addiction withdrawal	0.04	P>0.05	Consequences of addiction	0.12	P>0.05
Escape from addiction	0.05	P>0.05	Addiction as a solution	0.11	P>0.05

To examine the equality of covariance variance matrix, Box's test was used and its results indicated that this assumption has been met ($P > 0.05$; $M \text{ Box} = 2.54$). Therefore, multivariate covariance analysis was run and the results showed that the groups were different in the linear combination of the

components (Effect size = 0.996, $P < 0.001$, $F = 329.76$, Wilks's $\Lambda = 0.034$). To examine the patterns of difference, univariate analysis of covariance was used as presented in table 4.

Table 5: Univariate analysis of covariance results representing the differences

<i>Variables</i>	<i>Mean Squares</i>	<i>F</i>	<i>Sig.</i>	<i>Eta squared</i>	<i>Statistical power</i>
Drug use	1813.15	533.22	0.0005	0.90	0.94
Cause of drug use	1116.6	304.13	0.0005	0.84	0.91
Acceptance of addicts	521.79	385.88	0.0005	0.87	0.91
Addicts' personality	476.96	245.32	0.0005	0.81	0.88
Community attitude	1141.81	395.27	0.0005	0.87	0.91
Addiction withdrawal	404.93	395.27	0.0005	0.81	0.88
Consequences of addiction	202.19	401.32	0.0005	0.87	0.91
Escape from addiction	159.16	341.08	0.0005	0.85	0.91
Addiction as a solution	162.93	304.39	0.0005	0.84	0.89

Discussion and Conclusion

The aim of this study was to investigate the effect group training of drug abuse complications on attitudes towards addiction among high school female students. The results showed that the targeted training program had a significant positive effect on all components of attitudes towards addiction. These findings are consistent with the results of studies carried out by Usher et al. (2015), Miowski et al. (2015), Espada et al. (2015), Tahmasebipour et al. (2016), Anderson et al. (2017), and Naemi (2015).

Drug abuse tendency is a phenomenon that is affected by various personal, family, social, economic, political, and cultural factors (Rather et al., 2013). Family is one of the most important factors in the prevention or production of addiction tendency in children (Piko, & Kovács, 2010). Children who are in contact with drug abusers and who do not receive preventive intervention programs suffer from more behavioral and emotional problems and are more at risk of substance abuse (Vilela, Silva, Grandi, Rocha, & Figlie, 2016). Addicts' families usually do not want their children to receive individual or group intervention in terms of awareness-raising and addiction prevention (Kelley et al., 2014). Researchers have found that the individuals who experience more problems and difficulties in their childhood are more likely to be involved with drug abuse. Meanwhile, those whose parents are addicted and who have more access to drugs and are mistreated are placed in a more dangerous situation (Benjet, Borges, Medina-Mora & Mendez, 2013). On the other hand, it has been proven that there is a strong relationship between behavioral disorders and family environment variables. The extent of family-related incidents has a detrimental effect on the development and growth of children (Lombard, Pullen & Swabey, 2017), while these factors cause behavioral problems, poverty, mental illness, and family violence (Fatori, Bordin, Curto, & Paulaa, 2013). Poor supervision and relationships with deviant people (Van Ryzin, Fosco & Dishion,

2012), physical abuse, sexual harassment, and neglect of children (Appleyard, Berlin, Rosanbalm & Dodge, 2011) are predictors of drug use.

Various studies have reported the predictors of drug use as follows: persuasion of friends and giving company to them, disturbance in the process of socialization, weaknesses in official and informal monitoring, addiction of other members in the family, extrication from social pressures, drug users' worldview towards drugs and life, weakness in self-assertion power and decision-making, curiosity and lack of awareness of substance abuse complications, low self-esteem (Stephanie, 2010), weakness in self-control and grief about failures, and positive attitudes toward drug use (Roisin, Paula, Patrick & Craig, 2007). Addicts' children are likely to be inclined to substance abuse and abnormal behaviors (Buu et al., 2012). In addition, these individuals show a higher tendency toward alcohol drinking and drug use in early adolescence than children in non-addicted families (Adkison et al., 2013). Hence, the growing trend of addiction tendency in today's society can be rooted in individual relationships with the family. Generally, the families whose parents have a higher education level enjoy a higher potential to increase their children's awareness of substance abuse and they turn to different methods to raise awareness and develop a proper attitude towards substance abuse in their children. In addition to the implementation of prevention and care programs, it is necessary to do further research on the adverse effects of substance abuse tendency on student growth in order to provide the required conditions for their mental health and to combat their educational failure, crime, substance abuse, and psychological disorders caused by narcotic and psychoactive drugs (Fatori et al., 2012). Therefore, educational entities and social institutions, such as education department, well-being office, and Imam Relief Committee should turn to helping the families with addicted members that are in need of support.; indeed, with appropriate education in addiction prevention and its unpleasant side effects, they can provide grounds for improving the mental health and well-being of individuals, especially adolescents and young people. One of the limitation of this study was that it did not include any follow-up and was only limited to high school students in Sheshtamad. Therefore, it is necessary to exercise discretion in generalizing the results in the long run and to other populations. It is suggested that further studies in this area examine the effects of substance abuse complications on boys with greater samples with follow-up stages and the findings be compared with the findings of the present study.

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