



Short communication

Family members affected by a relative's substance misuse looking for social support: Who are they?



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ARTICLE INFO

Article history:

Received 28 May 2014

Received in revised form

24 November 2014

Accepted 24 November 2014

Available online 10 December 2014

Keywords:

Affected family members

Substance misusing relatives

Seeking help

ABSTRACT

Background: This study proposes to describe family members in the city of Sao Paulo who are seeking support in mutual self-help groups to deal with a substance misusing relative.

Method: Five hundred participants (one participant per family) completed a structured questionnaire collecting socio-demographic information, length of time taken to seek help, and where they sought help. Participants were recruited from the mutual self-help group 'Amor Exigente' in the city of Sao Paulo, Brazil.

Results: Parents of substance misusers counted as the largest group of family members. It took an average time of 3.7 years for the family members to discover their relatives' substance misuse. 42% had then sought help immediately; it took an average of 2.6 years for the remaining 58% of the sample to seek some form of support. A belief that the substance misuse of their relatives was just a transient problem or that they could cope with the situation by themselves were among the most indicated reasons for delay in seeking help.

Discussion: Findings stress the importance of implementing services that take into account the difficulties families have in finding help to deal with the substance misusing relative.

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1. Introduction

According to statistics from the World Health Organization's Global Burden of Disease report (WHO – World Health Organization, 2010), the problematic misuse of alcohol and drugs in the Americas is responsible for the loss of 18 Disability Adjusted Life Years (DALYs) for every thousand residents. Although figures such as these highlights the impact that alcohol and drug misuse has on an individual's life, they fail to address the additional damages

that addiction causes to family members of the substance misusers (WHO – World Health Organization, 2010). Recently, much work has been carried out to describe the many adverse effects that living with and/or caring for a relative who misuses substance(s) can have on family dynamics and functioning. In Brazil however, despite the growing attention on developing interventions to tackle the increasing rate of substance use in the country, it remains unclear how Brazilian families are dealing with the consequences of having a relative suffering from substance dependence.

Evidence from studies carried out outside Brazil suggests that the experience of affected family members (AFMs) in coping with substance misusing relatives (SMRs) can be devastating for the physical, financial, interpersonal and social aspects of the family functioning (Copello et al., 2009a, 2010; Templeton and Coppello, 2012; Velleman et al., 2003). Moreover, the consequences of this experience can lead to psychological forms of distress, such as family tension, stress, worry, stigma, and feelings of guilt, failure and helplessness (Clark and Oswald, 2002; Copello et al., 2009b; Orford et al., 2005). There is also further evidence revealing a high prevalence of medical and psychiatric conditions among AFMs, in

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particular a strong tendency for them to develop substance use disorders, depression, anxiety and trauma effects (Lipscomb et al., 2003; Ray et al., 2005, 2009). Furthermore, a large number of studies reinforce the importance of taking into account the transformations and difficulties that AFMs are exposed to when implementing substance misuse treatments (Copello et al., 2009a; NICE, 2007; NTA, 2008; Orford et al., 2005). Evidence suggests that, apart from predicting the risk of developing psychological adjustments in AFMs, the adoption of services that embrace the needs of family members often enhances positive change in the SMRs (De Civita et al., 2000; Copello et al., 2010; Orford et al., 2007; Roozen et al., 2010).

As there is not a single study to date in Brazil that has investigated the AFM population on a large scale, systematic information on the profile of this population is sparse. In order to predict the development of further health disparities in the country and to maximize effects of the treatment and rehabilitation processes of the SMRs, services aimed at improving and supporting the health and well-being of the AFM population is required, and therefore information about this population is necessary. As a result, the present study aims to gather information on who constitutes the AFM population in Brazil that is seeking help and support to deal with the widespread problems associated with the SMRs.

2. Methods

2.1. Sample

The total sample is comprised of 500 participants (one participant per family) with an age mean of 48.9 (SD = 12.7). Seventy seven percent of the sample were female participants ($n = 385$) with an age mean of 48.1 (SD = 12.7), 33% were male participants ($n = 115$) with an age mean of 51.5 (SD = 12.5). Fifty seven percent of the total sample ($n = 285$) indicated they were in a stable union relationship. A large part of the sample reported belonging to the Brazilian social classes B (47%, $n = 235$) and A (19.4%, $n = 97$). Moreover, the majority of participants have completed secondary education or obtained a college degree qualification (74%, $n = 370$).

2.2. Material

A questionnaire containing demographic questions was applied. Apart from questions about the participant was also asked for information about the SMR, including demographic questions and the SMR's substances of preference. Other questions concerned the time taken for the participant to seek help and reasons why were also added in the questionnaire, as well as the main forms of distress experienced by the participant in the last three months that resulted in conflicts with the SMR.

The Brazilian Economic Classification Criterion (Critério de Classificação Econômica Brasil – CCEB) was utilized to identify participants' socio-economic class. The CCEB is a brief scale measuring some household characteristics like for example the presence and amount of household items and education levels of the residents.

2.3. Procedure

A survey was carried out among family members of substance misusers who were attending the support groups 'Amor Exigente'. The 'Amor Exigente' is a Brazilian adaption of the American support group 'Tough Love'. The main objective of this group is to offer psychological support to families that have SMRs by following a set of philosophical principles (for further details about 'Amor Exigente,' see Menezes and Cerchiaro, 2011). Currently, there are 576 groups across the country, with an estimated 100,000 people per month attending the Amor Exigente's activities. Data were gathered through questionnaires during a series of visits to the meeting groups between May, 2009 and January, 2010 in the city of Sao Paulo. Forty groups were visited during this period. Ethical approval was obtained through the Ethics Committee of the Federal University of São Paulo.

3. Results

3.1. The substance misuse problem

The majority of the participants reported having a male family member who was misusing substances (91.0%) and the average age of the substance misuse relatives was 28.4 (SD = 10.0). Additionally, 67.6% of the family members that participated in the study indicated being a parent of a substance misuser, 11.0% were spouses,

and 8.6% were siblings. A small part of the total sample indicated that they were grandparents of a substance misuser (4.0%) as well as an uncle/aunt (4.0%), a boyfriend/girlfriend (2.8%), or an offspring (2.0%). According to family members, the most prevalent substance used by their relatives was cannabis (67.6%) followed by cocaine (64.2%), alcohol (47.6%) and crack cocaine (38.8%). Participants who had a female SMR indicated alcohol as the most often abused substance (71.4%). Overall, it took an average time of 3.7 years for the AFMs to discover about the substance misuse of their relatives.

3.2. Support seeking

Forty two percent of the families reported having sought some form of help or treatment immediately after discovering their relative's substance misuse. The other 58.0% of the participants indicated that they took an average time of 2.6 years to seek help after discovering about the substance use problem. Therefore, for the majority of the sample it took an average of over six years for the family member to discover the problem and to seek for some form of help.

For those who did not seek help immediately, the most common reasons for the delay included a belief that the substance use problem was transient and would be resolved without help, that they did not know where to search for help, and that the SMRs did not allow the AFMs to seek help.

Further information about the reasons for the delay in seeking help is illustrated in Table 1. With regards to the most common places sought for help, a large proportion of the participants indicated they first went to professionals (35.8%) including doctors, psychologists and therapists, and secondly to support groups (33.0%) like 'Amor Exigente' and Alcoholic/Narcotic Anonymous.

3.3. Causes of conflict between AFMs and SMRs

Illustrated in Table 2 are the most recent physical and psychological forms of distress reported by AFMs that led to conflicts with the SMR. As indicated, the most cited causes of conflict are the ones associated to the unreliable characteristics of the SMRs. Other mentioned causes include the difficulty to communicate with the SMR, problems related to money, the provocative attitudes of the SMRs, and physical fights.

4. Discussion

The purpose of the present study was to explore affected family members (AFMs) in Brazil who are seeking help to deal with the substance misuse of their relatives. As there is no a study to date to have explored the profile of this population in Brazil, results presented here offer a benchmark for future work. In particular, results revealed that for the large part of this research population (58%) it took an average of six years for AFMs to seek support from the time their relative started to misuse substances.

The high prevalence of participants who indicated that they thought the substance misuse of their relatives was just a transient problem, or that they could cope with the problem by themselves, reinforces the difficulties that families have to understand when the use of certain substance becomes problematic. Additionally, it is likely that an underestimation of the problems might be strongly influenced by the negative social stigma attached to substance misuse, leading to difficulties in discussing the issue and admitting the problem (Copello and Orford, 2002). In the case of Brazil, it might be that the social stigma attached to substance misuse might be exacerbated due to the collectivist patterns of the culture. In such collectivist cultures, the interconnectedness of people play a pivotal role in each person's identity, as individuals are more likely to define themselves as part of a group and to pay less attention to

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