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Investigating Key Variables in Family-Centered Models for Managing Recovery, Prevention, And Reducing Relapse in Hospitalized Addicts

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Abstract

Purpose: The present study examined key variables in family-centered models for managing recovery, prevention, and reducing relapse in hospitalized addicts.
Methods: This study is applied in terms of purpose and descriptive-correlation method. The statistical population included all addicts hospitalized in Sari hospitals, and the sample size was estimated to be 92 people using the Krejci-Morgan table. The research data was collected through a researcher-made questionnaire. The validity of the questionnaire was confirmed by professors and its reliability was obtained above 0.7 for all variables using Cronbach's alpha coefficient. In order to analyze the data, descriptive statistical methods and inferential statistical tests were used through SPSS software.
Results: The research findings indicate that family-centeredness and its variables (meeting needs, self-knowledge and identification, education and learning) have a positive and significant relationship with improving recovery management, prevention, and reducing relapse in hospitalized addicts.
Conclusion: Families that provide their needs, proper attention, self-knowledge and identification, and desirable education and learning in their structure can be effective in promoting recovery management, prevention, and reducing relapse in addicts.

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Introduction

Social harms are one of the major concerns of human societies today. Every society, in accordance with its own conditions, culture, transition and development process, growth and decline, faces a variety of problems that have undeniable effects on the growth and progress of society. One of the biggest problems that has always plagued human societies with its problems and sinister consequences is the phenomenon of addiction, which is both a consequence and a cause of many other social problems and harms (1). One of the important issues of this disorder is the frequent relapses of patients, which causes the quality of life of addicts to decline compared to other members of society. Most treatment programs focus on reducing or stopping drug use; however, substance-dependent patients also struggle with numerous other problems, many of which may predate drug use. These problems may even be important causes of drug use in the first place (2). Thus, in addition to targeting reduction and cessation of drug use, treatment programs should also consider relevant and important psychological variables related to recovery management, reduction of addiction relapse, and even prevention (3).

Many theorists, including Hurlock and William Good, consider the source of abnormality in the family and familiar environment and introduce key variables in family-centered models as important factors in this regard. Hurlock believes that the way a person is raised by the family, the mechanisms of socialization in the

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family, and the way the child's personality develops in the family environment can be a source of abnormality. Hurlock believes that young people and people who display antisocial behavior in adulthood are individuals who did not have a healthy and productive family background (4). He believes that parents have an impact on their children in the socialization process because they use different parenting models for their children and use specific methods. In this way, Hurlock considers all types of abnormal behaviors to be related to anomic conditions in the family and dysfunction in the functioning of the family system, and believes that delinquency is the result of lack of normal learning and proper upbringing in educational and training environments, as well as unsuccessful and inadequate socialization in the family environment (5).

William Good extends the theory of anomie to the family institution and states that the family structure, as the most important source of socialization for individuals, can be the key to understanding the personality of the individual who develops within it, and any disorder and disorganization in the structure of the family institution can be effective in the emergence, development, and growth of the delinquent and deviant personality (6). William Good believes that the family, as a small social system, forms the core and foundation of the larger society. The values and norms that govern it influence each of its members. Understanding the organization and the ideas of the family is the most important source of understanding the individual (7). In his famous book entitled (Society and Family), William Good has pointed out the most important functions of the family as well as the factors that lead to disintegration and exacerbation of anomie conditions in the family. In his opinion, the family plays a prominent role in meeting the spiritual, physical, social, emotional, and psychological needs of its members (8). The family also plays an important role in the process of self-discovery and identity-finding for its members. This institution plays an important role in the upbringing, learning, and education of its members and is a source of developing the talents of its members (9).

Babaei et al. (2023) presented a study titled "Modeling the tendency to use drugs based on family functioning and family emotional atmosphere with the mediation of social health in rehabilitated women in Mashhad." The findings showed that social health has a positive mediating role in the relationship between the two variables of family functioning and family emotional atmosphere with the tendency to use drugs again. As a result, due to the powerful influence of social health, family functioning, and the emotional atmosphere of the family, along with the influence of social health, on individuals' ability to avoid the tendency to use drugs again, both in the educational and therapeutic systems should be considered in educational-therapeutic programs (10).

Studies by Nikdel et al. (2020) have shown that the emotional atmosphere of the family, as another variable studied in this study, emphasizes the claim that this factor is the most appropriate criterion and criterion for measuring the quality of social relationships and the psychological state of individuals in the family environment (11).

Sharifi and Ghahremani (2019) investigated the relationship between family structure, social support, suicidal tendencies and life satisfaction among addicted men. The findings showed that there is a positive and significant relationship between family structure and life satisfaction, and a negative and significant relationship between suicidal tendencies and life satisfaction. There is a positive and significant relationship between social support and life satisfaction. Also, the results of regression analysis showed that family structure predicted 72% and suicidal tendencies predicted 74% of changes in life satisfaction. The results showed that there is a relationship between family structure, social support, suicidal tendencies and life satisfaction among addicted men (12).

Oltean et al. (2020) have identified family functioning as a key factor in the persistence and relapse of addiction. Social learning theory and conversational communication analysis theory also emphasize family functioning as an influential factor in creating desirable behaviors. Effective family functioning plays an important role in the physical, emotional, and social health of individuals, and understanding it involves paying attention to six dimensions of family functioning, namely problem solving, communication, roles, accountability, effective participation, and behavioral control (13).

Based on what has been stated and a review of the research background, no study has been conducted to analyze the family-centered relationship and its variables and to promote prevention, recovery management, and reduce addiction relapse from the perspective of addicts. The process of solving this problem and managing this crisis can be a solution to relieve the tensions caused by this problem, perhaps the ongoing process of this crisis has irreparable effects for these patients [14]. Therefore, the aim of the present study is based on a family-centered analysis and its variables to improve recovery management, prevention, and reduce relapse in hospitalized addicts, and the following hypotheses are put forward:

The main hypothesis of this study is that key variables in family-centered models are significantly related to improving recovery management, prevention, and reducing relapse in hospitalized addicts. Specifically, meeting needs is significantly related to

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improving recovery management, prevention, and reducing relapse in hospitalized addicts; self-knowledge and identity-finding have a significant relationship with improving recovery management, prevention, and reducing relapse in hospitalized addicts; and education and learning have a significant relationship with improving recovery management, prevention, and reducing relapse in hospitalized addicts.

Methods

The present study is applied in terms of purpose, descriptive in terms of method, survey type and correlation type. The statistical population includes 118 addicts hospitalized in Sari hospitals, and the sample size is determined as 92 people using the Krejci-Morgan table. A researcher-made questionnaire was used to collect data. The validity of the questionnaire was confirmed by the professors and its reliability was measured using Cronbach's alpha coefficient, and the results are presented in Table 1.

Table 1. Results of Cronbach's alpha measurement

Variables	Cronbach's alpha coefficient
Family-centered	.80
Meeting needs	.77
Self-knowledge and identification	.81
Education and learning	.80
Recovery Management Prevention	.74
Reduction of Addiction Relapse	.76

Cronbach's alpha coefficient for all research variables was above 0.70, indicating appropriate and desirable reliability of the measurement tool.

Descriptive statistical methods (frequency, percentage, mean, standard deviation) and inferential statistical tests were used to analyze the data. All the calculations mentioned were analyzed using SPSS software.

Results

The demographic characteristics of the respondents are presented as follows:

Table 2. Demographic characteristics of the respondents

Variable		Abundance	Percentage
sexuality	Female	4	4.4
	Male	88	95.6
Marital status	Single	11	11.9
	Married	81	88.1
Education	Diploma and below	58	63.1
	Associate degree	21	22.8
	Bachelor's degree and above	13	14.1
Age	20 to 30	7	7.6
	31 to 40	33	35.9
	41 to 50	41	44.6
	Over 50	11	11.9

According to the results of Table 2: 4.4 percent of respondents are female and 95.6 percent are male. 11.9 percent of respondents are single and 88.1 percent are married. 63.1 percent of respondents with the highest frequency of education have a diploma or lower and 14.1 percent with the lowest frequency have a bachelor's degree or higher. 44.6% of respondents are most frequently between 41 and 50 years old, and 7.6% are least frequently between 20 and 30 years old.

Table 3. Mean and standard deviation of research variables

Variables	Mean	Standard deviation
Family-centered and its variables	3.54	.377
Meeting needs	3.75	.600
Self-knowledge and identification	3.71	.650
Education and learning	3.74	.682
Recovery Management Prevention	3.51	.640
Reduction of Addiction Relapse	3.60	.580

Among the research variables, meeting needs has the highest average (3.75) and promoting prevention recovery management has the lowest average (3.51). The total average of family-centeredness is also 3.54.

The following is a test of the research hypotheses:

Main hypothesis: Family-centeredness and its variables have a significant relationship with promoting prevention recovery management and reducing relapse in hospitalized addicts.

Table 4. Correlation test between strategies to promote recovery management, prevention, and relapse reduction

Component	Index	Improving prevention recovery management	Reducing addiction relapse
Family-centeredness and its variables	Pearson Correlation	.241	.230
	Significance	.007	.001

The test results show that there is a significant correlation between family-centeredness and its variables with improving recovery management, prevention, and reducing relapse to addiction. The calculated Pearson correlation value (0.241) and (0.230), which is significant at the 0.01 level, confirms the main hypothesis of the study. Therefore, it can be concluded that family-centeredness and its variables have a positive and significant correlation with

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improving recovery management, prevention, and reducing relapse in hospitalized addicts.

Sub-hypothesis 1: There is a significant relationship between meeting needs and improving recovery management, prevention, and reducing relapse in hospitalized addicts.

To test this hypothesis, Pearson correlation test was used, the results of which are shown in the following table:

Table 5. Correlation test between meeting needs and improving recovery management, prevention, and reducing relapse

Component	Index	Improving prevention recovery management	Reducing addiction relapse
Meeting needs	Pearson Correlation	.195	.180
	Significance	.001	.009

The test result shows that there is a positive and significant correlation between meeting needs and improving prevention recovery management and reducing relapse. The calculated Pearson correlation value (0.195) and (0.180), which is significant at the 0.01 level, confirms the first sub-hypothesis; therefore, it can be concluded that meeting needs has a significant effect on improving prevention recovery management and reducing relapse in hospitalized addicts.

Second Sub-Hypothesis: Self-knowledge and identification are significantly related to improving recovery management, prevention, and reducing relapse in hospitalized addicts.

To test this hypothesis, Pearson correlation test was used, the results of which are shown in the following table:

Table 6. Correlation test between self-knowledge and identification with improving recovery management, prevention, and reducing relapse

Component	Index	Improving prevention recovery management	Reducing addiction relapse
Self-knowledge and identification	Pearson Correlation	.210	.241
	Significance	.009	.009

The test result shows that there is a positive and significant correlation between self-knowledge and identification with the promotion of recovery management, prevention and reduction of addiction relapse. The calculated Pearson correlation value (0.210) and (0.241), which is significant at the 0.01 level, confirms the second sub-hypothesis; therefore, it can be concluded that self-knowledge and identification have a positive and significant correlation with the promotion of recovery management, prevention and reduction of addiction relapse in hospitalized addicts.

Third Sub-Hypothesis: Training and learning have a significant relationship with improving recovery management, prevention and reducing relapse in hospitalized addicts.

To test this hypothesis, Pearson correlation test was used, the results of which are shown in the following table:

Table 7. Correlation test between training and learning with improving recovery management, prevention and reducing relapse

Component	Index	Improving prevention recovery management	Reducing addiction relapse
Education and learning	Pearson Correlation	.190	.230
	Significance	.001	.001

The test result shows that there is a positive and significant correlation between training and learning with the promotion of recovery management, prevention and reduction of addiction relapse. The calculated Pearson correlation value (0.190) and (0.230), which is significant at the 0.01 level, confirms the third sub-hypothesis. Therefore, it can be concluded that training and learning has a positive and significant correlation with the promotion of recovery management, prevention and reduction of addiction relapse in hospitalized addicts.

Discussion

The present study aimed to investigate key variables in family-centered models for managing recovery, prevention, and reducing relapse in hospitalized addicts. The results of testing the research hypotheses are presented as follows: Main hypothesis: Family-centeredness and its variables have a significant relationship with improving recovery management, prevention, and reducing relapse in hospitalized addicts.

The test results show that there is a significant correlation between family-centeredness and its variables with improving recovery management, prevention, and reducing relapse. Therefore, the main hypothesis of the study is confirmed and it can be concluded that family-centeredness and its variables have a positive and significant correlation with improving recovery management, prevention, and reducing relapse in hospitalized addicts (11).

Sub-hypothesis 1: Meeting needs has a significant relationship with improving prevention recovery management and reducing addiction relapse in hospitalized addicts.

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The test results show that there is a positive and significant correlation between meeting needs with improving prevention recovery management and reducing addiction relapse. Therefore, the first sub-hypothesis is confirmed and it can be concluded that meeting needs has a significant effect on improving prevention recovery management and reducing addiction relapse in hospitalized addicts (4).

Second Sub-Hypothesis: Self-knowledge and identification have a significant relationship with improving recovery management, prevention and reducing relapse in hospitalized addicts.

The test results show that there is a positive and significant correlation between self-knowledge and identification with improving recovery management, prevention and reducing relapse. Therefore, the second sub-hypothesis is confirmed and it can be concluded that self-knowledge and identification have a positive and significant correlation with improving recovery management, prevention and reducing relapse in hospitalized addicts.

Third Sub-Hypothesis: Training and learning have a significant relationship with improving recovery management, prevention and reducing relapse in hospitalized addicts.

The test result shows that there is a positive and significant correlation between training and learning with improving recovery management, prevention and reducing relapse. Therefore, the third sub-hypothesis is confirmed and it can be concluded that training and learning have a positive and significant correlation with improving recovery management, prevention and reducing relapse in hospitalized addicts.

Conclusion

If the physical, emotional and psychological needs of individuals are met by the family and healthy groups; it does not create a problem for the individual. However, the lack of meeting these needs by the family can lead the individual to deviant groups. Both psychologically and sociologically, internal control is affected by the family. This means that adolescents' association with drugs or any other crime is strongly correlated with alienation from the family. A factor that can be strengthened or weakened by the presence or absence of external control (11).

In fact, families that provide for the needs of their structure, pay proper attention to self-knowledge and identity, and provide appropriate upbringing and learning, act in a way that demonstrates high standards of balanced behavior and assure their members that they will achieve the desired goals with effort commensurate with the understanding of the circumstances. In this case, a favorable environment will be provided for better decision-making, improved management, prevention, and reduction of relapse in addicts (12, 14).

Among the limitations of the research, we can mention the problems of cooperation of some members of the statistical community in collecting information. For future research, it is suggested that this research be examined from the perspective of consultants and experts and its results be compared with the findings of the present study.

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Authors contribution

H. S. conceptualized the study objectives and design.

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Ethics

None

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