Patterns of Interactions Between Family Members and Its Relation to Drug Addiction
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Abstract

Background: Parenting or child rearing is the process of promoting and supporting a child physically, emotionally, socially, and intellectual development of him from infancy to adulthood. Disturbances within family communication have a negative impact on adolescent’s development and lead them to try to find a way out of the unbearable family situation like using drugs and abuse it. Dysfunctional family relationships or dysfunctional parenting are important predictors of addictions to all psychoactive substances. It is not rare to find that an addict’s parents are very ambitious. The question remains how this relationship and interaction affects substance abuse in those individuals and to what extent. The aim of the study was to assess the quality of family communication between individuals diagnosed with substance abuse disorders and their parents and compare it with family communication between healthy individuals. Overall, by promoting education, support, community engagement, and resources, communities can create a comprehensive and collaborative approach to improving parenting practices and preventing addiction.

Keywords: Patterns of Interactions, Family Members, Drug Addiction.

1. Introduction

The People in today's society still look on their families for the social support, attachment figures, and connections they need. It is important to think about how substance use disorders (SUDs) affect people in a family setting. Financial problems, legal issues, emotional suffering, unfulfilled developmental requirements, poor connection, and physical aggression are just some of the far-reaching implications that a person's drug use may bring to their loved ones. Substance use disorder is also more common in young people [46].

Due to this, treating the addict alone can only go you so far. Unlike any other medical specialty, social workers have always included the patient's loved ones while making a diagnosis. One of the cornerstones of social work theory and practice is the idea that people and their environments impact one other. This topic was chosen to highlight the positive impact that family involvement in drug use disorder treatment can have on the individual and their loved ones. Family techniques have shown to be more beneficial than solo or group treatment, according to study [2].

Treating the individual without involving their family may decrease treatment efficacy for two main reasons: first, it ignores the devastating effects of SUDs on the family system, leaving family members untreated, and second, it fails to recognize the family as a potential support system for recovery from SUDs. To better understand how drug use problems impact families, it may be helpful to examine two theories: systems theory and attachment theory [28].

This study aimed to assess the patterns of communication between parents and their children who are struggling with drug addiction, in comparison to communication between healthy individuals.

Children are shielded from harm when their parents are good parents.

The mark of a good parent is one who raises children who are prepared to face the challenges of their own culture or subculture. What makes great parenting succeed in most cases may, however, be generalized to a degree. We may achieve remarkable progress when we discover the parenting styles that prepare children for life outside the home [12].

According to Darling, a parent’s style is the prevailing mood throughout interactions with their children. It sets the emotional tone for the parent’s interactions with the child. The parenting style of a parent has a significant impact on their child’s development. The kids’ emotional and social development suffer as a result. A person’s attitude to parenting is greatly influenced by the example given by their own parents [10].

Their spouse has an impact on their parenting style, but their temperament, level of education, culture, and social circumstances all have a role. Both parents and children's temperaments have a role in shaping parenting styles, and it's normal for parents to take diverse ways [27].

Attributes of a Good Parent

Good parenting is characterized by the promotion of psychological adjustment. Being truthful, understanding, self-reliant, generous, cooperative, restrained, and optimistic are all parts of it. In addition to preparing kids for academic success, it safeguards them from developing anxiety, depression, and eating disorders, promotes antisocial behavior, delinquency, and substance misuse, and fosters intellectual curiosity, motivation, and ambition [29].

Kind and Comforting: Epstein found that being warm and loving while simultaneously providing parental guidance was the most important element
for raising happy kids out of 2,000 parents in a 2010 research.[13]

Epstein argues that the ability to manage one's own emotions and stress is crucial for the development of emotionally and socially healthy children. Children often want to imitate their parents' methods of emotional management when they are feeling overwhelmed. Not modeling healthy coping techniques is a parent who brings their bad emotions into the house via fights, foul language, or taking it out on their children.[15]

Taking Up Positive Example: Young children learn social norms by seeing their parents and other adults in their immediate environment. When kids see their parents becoming furious and losing control, it makes them feel frightened. They could want to follow in their parents' footsteps and resort to fighting and arguing when they have a dispute. A wonderful model for children to follow is a parent who can talk things out instead of becoming angry when they disagree with them.

Implications of Proper Parenting

Positivity in parenting relies heavily on open and honest communication. One of the main goals of a positive parenting style is to replace negative and harsh communication with constructive, action-oriented methods of interacting with children. We can help kids feel better by providing them with safe spaces to express their emotions and by teaching them that the choices they make about their actions have a direct impact on their mood and the world around them.[16]

The children will experience more joy and build self-esteem as a result of the emphasis on constructive activity, trust, and communication. The child's outlook on life will be positively impacted by an emphasis on encouragement and growth rather than punishment and avoiding bad habits. Rather than seeing setbacks and flaws as reasons to be punished and feel bad about themselves, kids will learn to view them as chances to grow and better, which will lead to more positive behavior.[17]

It is well-established that parenting styles impact several facets of children's and teenagers' maturation. There has been a long-held belief that the best parenting style is authoritative parenting, which is defined as providing a great lot of parental warmth and support but also establishing clear limits, encouraging open communication, and supervising children closely.[10]

In addition, the researchers discovered that there was a correlation between baseline perceptions of issue communication and increasing drug usage at 4 years and higher sexual participation at 2 years.[1]

Supervision

There is a strong correlation between parental monitoring and risky conduct in adolescents. Teens are spending more and more time alone after school due to shifts in the American workforce.[1]

More time spent unattended is linked to increased sexual activity in adolescence, according to Cohen's research. The dangers of having sex or using drugs rose in direct correlation to the amount of time sexually active youths spent alone after school, with over half of these people engaging in such behavior.[10]

Effects of Adverse Childhood Events on Family Dysfunction, Both Individually and Collectively

Physical and sexual abuse, mental and physical neglect, poverty, parental psychopathology, and family conflict are all examples of adverse childhood experiences that are widespread in this demographic. According to studies conducted in nations with high per capita income, between 10 and 20 percent of children see interparental violence, and 4 to 16 percent of children suffer severe parental violence. Between 5% to 15% of males and 15% of females have been victims of sexual abuse.[25]

According to Fergusson, young people who experienced maltreatment as children are more likely to suffer from anxiety disorders, depression, conduct/antisocial behavior, drug misuse, suicidal thoughts and attempts, and attempted suicide. There is mounting evidence that traumatic events in childhood might affect an individual's physical health and their use of health care services throughout their adult years.[16]

Traits of Ineffective Parenting

Parenting styles that are high in demandingness and/or responsiveness are more common than those that are authoritarian, permissive, or uninvolved. Some types of poor parenting emerge from these techniques because they are unbalanced.[19]

Arrogance Towards Children: Being arrogant is a terrible way to communicate, particularly when dealing with children. Raging and scolding children has a devastating effect. As a result of their heightened sensitivity, children often respond adversely to their parents and adopt unusual protection strategies when confronted with challenging circumstances.[19]

Parents' lack of trustworthiness is shown when they break promises.[20]

Meeting All of Their Requests: Parents who think they can buy their children whatever they want ruin their childhood. In terms of discerning needs from wants, children lack maturity. The objects that other kids use pique their interest, and they may even want to borrow them. In the long run, there would be more demands if we cater to children's every whim.[33]

There will be good times and bad, and we must never let our children know the difference. Almost no parent wants their children to go through tough times. The only way a youngster can develop the resilience to deal with the harsh facts of life is via experiencing the inevitable challenges that come with growing up. Lots of problems arise for children.
of parents who spoon-feed them when they go out on their own [42].

Parents put too much pressure on their children to succeed in life and to excel in all they do, even if it means ignoring or downplaying the importance of others. Everywhere a youngster goes, including school and home, they encounter competition [20].

Parenting and the Impact on Mental Health

There is a correlation between parenting and both low self-esteem and depression. When compared to other parenting styles, children whose parents exhibited an authoritarian style had the lowest levels of self-esteem. On the other hand, children whose parents exhibited an authoritative style—defined by high levels of support and warmth—were less likely to suffer from depression. cited as [34].

Authoritarian parenting styles, on the other hand, were associated with higher rates of depression; these types are defined by excessive overprotection, low levels of nurturing, and a lack of parental support. [40].

Negative Parenting and Its Psychosocial Effects

Parental authoritarianism, permissiveness, and laissez-faire tendencies are outward manifestations of ineffective parenting.

The Authoritarian Approach to Parenting: Raised in authoritative circumstances, children are more likely to be independent and socially competent than those in authoritarian ones. A lack of emotional intelligence and empathy might be a result of parents who are unable to establish a secure attachment with their kid [19].

• Hi there, Tamasha! This father clearly uses an authoritarian approach. The relentless pressure from his father to pursue a technical job ensnares a story-loving boy who lives in the spirit of tales. He eventually caves in to this job path and does all the things he hates about life [20]. Children whose parents are not actively engaged in their lives tend to do poorly on a variety of psychological and behavioral assessments, according to research by Baumrind. A large number of problem behaviors and drug use are observed in these children [4].

• Children whose parents exhibit a permissive parenting style are more likely to participate in antisocial activities, such as drug usage and sexual interaction at a young age. Children in this environment may try out both good and bad behaviors without worrying about the consequences [40].

• High levels of social confidence and self-esteem are associated with lower levels of academic accomplishment and school participation among children whose parents are more lenient. They are also more prone to engaging in risky social behaviors and have a lower sense of responsibility. There is an increase in hyperactivity and aggressive behavior among children raised in this way compared to other parenting techniques [22].

• A lack of emotional and cognitive empathy is a direct result of a permissive parenting style. Children raised with a permissive parent do not place a great value on other people's emotions and experiences since this parenting style is entirely focused on the kid [19].

• Different ways that families communicate:

  - Consensual, pluralistic, protective, and laissez-faire are the four distinct varieties of family communication patterns identified by the Family Communication Patterns Theory. The amount of discussion and uniformity in these patterns varies.
  - Free and open discussion on any subject is encouraged at family gatherings.
  - Families that adhere to the conformity model often have one person (a parent) with absolute decision-making power.
  - In a pluralistic family, everyone has a say in family decisions and everyone talks to each other openly without forcing anybody to comply.
  - Everyone in the family is able to freely express their emotions and ideas via talk and compliance, which fosters a consensual environment. The ultimate say is often held by parents or caretakers.
  - Laissez-Faire: families emotionally separate from one another due to a lack of communication and uniformity. Usually, parents and caregivers don't really care about their children's decisions, so they let them choose their own.
  - The protective style is characterized by a lack of confidence in the children and an emphasis on rule obedience rather than discussion and compliance [8].

The Fundamental Link Between Different Approaches to Parenting and Substance Abuse

• American adolescents are still confronted with the significant issue of juvenile delinquency. More than 1.3 million cases involving delinquency were handled by courts having authority over juveniles in 2010. Both the juvenile justice system and social scientist have worked to uncover certain criminogenic risk factors linked to delinquency in an attempt to lower delinquent rates. Any personal trait that makes a person more likely to commit a crime is known as a criminogenic risk factor [14].

• A person's values and character attributes are just two of many aspects that could influence their decision to experiment with or misuse drugs and alcohol. Parental style is among the
twelve variables, and among the most significant [23].

- Using the terms "demandingness" (i.e., parental strictness, imposition, and firmness) and "responsiveness" (i.e., warmth, acceptance, and participation), Maccoby and Martin established a theoretical model of parenting styles [41].

- Authoritarian, neglectful, indulgent, and authoritative are the four parenting styles that are described by these aspects. An authoritative parenting style is one that is both very controlling and very affectionate. Neglectful parents are those that show little to no love and are unresponsive to their children's needs [30].

- Researchers in the field of criminology have looked at several potential causes of drug abuse in adolescents. A reasonable place to look into why some teens drink and take drugs and others don't is in the context of parent-child interactions, because parents have a lot of power to shape their children's behavior [39].

Parents' Approaches to Their Children's Addiction:

- There is a global epidemic of substance abuse. Epidemiological studies mostly demonstrate the frequency and severity of this intake among adolescents. The Brazilian Center for Information on Psychotropic substances (CEBRID) conducted nationwide surveys on student drug use in 2004 and 2010. The results revealed a concerning rise in the use of illegal substances and a concerning prevalence at a young age [11].

- Furthermore, there is evidence that children from less privileged socioeconomic groups are more likely to misuse and become dependent on substances, which is further linked to the existence of socioeconomic disparities among children [11].

Stages of addiction:

- There is a clear progression from the first use of the substance to the development of an addiction, since this process follows a predictable pattern. While the exact number of stages of addiction is up for discussion, seven is among the most often used. Following an individual's initiation, there are seven phases of substance use: regular use, risky usage, dependence, addiction, crisis, and treatment [28].

- First Stage: Beginning Addiction begins with the initial use of a drug, which occurs during the initiation stage. This may start at any point in a person's life, but the majority of addicts had used their drug of choice before the age of 18 and had a substance use problem by the time they were 20 [37], according to the National Institute on Drug Abuse.

- The motivations for adolescent drug use might range from pure curiosity to the influence of their peers. This second option is chosen in an effort to blend in more with that particular set of classmates [18].

- Next Step: Conduct Experimentation The user has progressed from a simple first-time experience to exploring the drug's effects in various settings throughout the experimentation stage [39].

- At this point, the substance is often associated with social activities, including having fun or unwinding after a hard day. Adolescents utilize it to alleviate the pressures of homework or to make parties more exciting. For the most part, adults explore for fun or as a means of relieving stress [37].

- The second stage of drug addiction is characterized by reduced or eliminated urges and continued self-control over drug usage. The frequency of both impulsive and controlled usage is largely determined by the individual's temperament and the motivation for drug use. The user is still able to quickly stop using the medication if they so choose, and they are not yet dependent on it [37].

- Third Stage: Continuous Use: A person's use of a drug goes from being used sometimes to being used regularly as they continue to experiment with it. Not that they use it often, but there seems to be a pattern to how they utilize it. Once social factors are no longer influencing their drug of choice, social users may start using the drug alone [37].

- This is also the stage when the drug's negative effects on the user's life might start to show. For instance, the person may start bringing their inebriated or stoned state to work every day. Even if the person hasn't developed an actual addiction just yet, they may start to mentally rely on and fantasize about their drug of choice more often. Despite the increased difficulty, quitting becomes doable with the right support system in place [37].

- Level 4: Precautionary Use By the time a person reaches Stage 4, their usage has escalated to the point that it negatively affects their daily lives. Having the odd hangover at work or a social function is tolerable in Stage 3, but by Stage 4, it starts to happen often and has an impact. All users will probably notice a significant decline in their performance at work or school, and many drinkers will be arrested for DUI at this stage. There may be new financial problems as a result of the excessive usage [21].

- Outside observers will likely see a change in the user's behavior at this moment, even if the user themselves may not be aware of it. Among the most noticeable changes in a drug user are:

  - Taking someone else's money
  - Putting off important tasks like attending to family or employment
- Trying to cover up their drug use
- Keeping narcotics in plain sight (such as mint tins)
- Peer group dynamics
- Seeing a number of physicians at once or switching doctors often (if taking medication)
- Getting bored with past interests

- Part 5: Being Dependent
  When a person's drug usage is driven by dependence rather than enjoyment or medical needs, they have entered stage 5. Although developing a tolerance should have already taken place by now, this stage is often seen as including dependency and tolerance. Consequently, at this point, only a physical or psychological reliance should be present.

- A person may develop a physical dependency on a substance after abusing it for an extended period of time, during which their body becomes habituated to and dependent on the drug. The body will go through withdrawal if usage is suddenly cut off. Medical experts should be consulted for the management of unpleasant and sometimes harmful symptoms associated with this condition, which manifest as a negative rebound. Since continuing usage is the most direct route to avoiding withdrawal symptoms, most people choose not to get treatment but instead keep using.

- Before a physical dependency develops, a person may reach this stage via psychological reliance on some substances, particularly prescription pharmaceuticals. When this occurs, the person starts to think that the substance is essential for their daily functioning.

- When this happens, the substance usually starts off as a way to deal with tough situations, but it quickly gets used for things it shouldn't be. A patient who takes pain medication, for instance, could start to overmedicate because they start to equate mild discomfort with severe pain.

- Phase 6: Dependency
  The terms dependency and addiction are sometimes used interchangeably; however, despite their similarities and their association with drug use, the two terms are really distinct. Substance usage is no longer an option for someone who has developed an addiction, which is one of the most notable changes.

- It will still be only a hint of one up until then. When people reach this point in their addiction, they feel helpless without their drug of choice and lose all control over their lives.

- Step 7: Crisis Management and Treatment
  A person's breaking point occurs at the last stage of addiction. By this point, the person's addiction has gotten out of hand and is threatening their health. This is sometimes called the crisis stage because it is at this period that addicts are most vulnerable to experiencing a catastrophic life event, such as a deadly overdose.

- There is a positive option that fits here instead of crisis, which is the worst-case situation for this stage. When many people first seek assistance from a rehabilitation facility to start treatment, it is often as a result of a crisis or on their own will. Consequently, this phase might symbolize the culmination of their addiction and the beginning of a fresh, hopeful existence free from drugs and alcohol.

Substance Use Disorder Criteria
- There are eleven distinct characteristics that characterize drug use disorders, which include:
  - Dosing yourself with more of the drug or keeping it in your system for longer than recommended.
  - The inability to control one's drug use while wanting to do so.
  - Investing much effort on obtaining, using, or overcoming the substance's effects.
  - Strong desires and impulses to take the drug.
  - Substance abuse prevents you from performing to your potential at home, in the workplace, or in the classroom.
  - Keeping using despite the negative effects on one's relationships.
  - Substance abuse causes a person to miss out on social, professional, or leisure opportunities.
  - Continually engaging in risky drug use.
  - Keeping using while being aware that it may be contributing to or exacerbating a mental or physical health issue?
  - Developing a tolerance that requires increasing doses to get desired effects.
  - Symptoms of withdrawal appear, and increasing dosage alleviates them. The number ten.
  - A psychiatrist, psychologist, or professional alcohol and drug counselor may do an examination as part of a comprehensive evaluation needed to diagnose drug addiction (substance use disorder). While scientific tests like blood and urine may help evaluate drug usage, they cannot diagnose addiction.
  - It is common practice for mental health providers to refer to the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) when making a diagnosis of a drug use problem.

Substance Addiction Types
- The need to self-medicate is a potential origin of drug usage. To treat or lessen the symptoms of mental illness, some individuals prefer to utilize illegal or prescribed medicines.
- Here are some substances that might harm mental health:
• Alcohol, especially when abused, may impede the healing process for those suffering from mental illness.
• One in twenty individuals in the UK are estimated to use cannabis, making it the most widely used illegal substance in the country. People who consume the substance may experience psychosis or schizophrenia. The dangers are heightened with early usage, chronic use, or the use of highly concentrated cannabis.
• Drugs like amphetamines and methamphetamines may make you feel depressed, anxious, and unable to sleep.
• Anxiety, paranoia, and sadness are symptoms of cocaine addiction.
• Ecstasy, the usage of ecstasy has the potential to cause anxiety and sadness.
• Heroin is a very addictive narcotic that may cause a person to lose interest in other things—their job, their family, their commitments—and even cause them to suffer from melancholy and insomnia. [5].
• Opioids, central nervous system depressants, and stimulants are the three most often abused prescription medication types in the United States. Some examples of these substances include barbiturates, codeine, fentanyl and its analogues, methadone, methylphenidate, morphine, oxycodone, and sleep aids, as listed by the National Institute on Drug Abuse (NIDA) [24].

Other Substances That Are Commonly Abusive:
• Among all substances, nicotine is the most widely misused. Despite the widespread knowledge of the dangers of smoking, an estimated 40 million Americans continue to be dependent on nicotine. One factor contributing to the extensive misuse of tobacco is the length of time it takes for the harmful health consequences of nicotine to become apparent [29].
• Caffeine is the most often used substance to change mood, whereas nicotine is the most misused drug worldwide. True, there is a danger to health from consuming excessive amounts of caffeine [40]. Several mental disorders, including caffeine-induced sleep disorder and caffeine-induced anxiety disorder, have been associated with caffeine consumption, according to studies [6].
• Although “designer drugs” like synthetic marijuana and bath salts are not yet prohibited, they pose a greater threat due to their potential for misuse [31].
• Some drugs, like anabolic steroids, may be overused even when they do not affect mood or cause intoxication. Abusive use of anabolic steroids, which are used to boost performance or build muscle and strength, is characterized by undesirable side effects that may be anything from mildly bothersome to potentially fatal. Substance abuse is any behavior that poses a risk of damage, regardless of how long the effects last. Any drug has the potential to be misused, at least in theory [35].
• Helping someone become self-aware of their problematic drug usage is an important first step in addiction therapy. Patients are always invited to refer themselves, even if interventions from worried loved ones usually lead to treatment [46].
• To determine the presence or absence of a drug use problem, a medical expert should formally evaluate the patient’s symptoms [46].

Treatment is effective for all individuals, no matter how severe or minor their disease is. Regrettably, a significant number of individuals who are in need of treatment for a drug use problem do not obtain it [18].
• Various forms of therapy are often necessary for SUDs due to the wide-ranging impact they have on a person’s life. Medication with talk therapy, whether individual or group, usually works best. For long-term success in treatment, it’s best to have a person-centered approach that takes into account their unique circumstances as well as any physical, mental, and social issues that may be present [18].
• Preventing relapses, managing withdrawal symptoms, and controlling cravings are all goals of medication treatment for substance abuse. People who struggle with substance use disorder (SUD) may benefit from psychotherapy in many ways, including increased self-awareness and coping skills, improved motivation and behavior regulation, and relief from stress [46].

2. Conclusion
Some patterns of father and mother parenting styles are predictive of bad attitudes as they may leave verbal and physical traumas for their children and increase their violent behavior toward themselves as they used to see these behaviors from their parents. These pathological families which act with strictness, imposition, parental firmness and high levels of control affect badly young people’s behavior, however authoritative and indulgent parents who are more affectionate and supportive seem to decrease risk of addiction. However good parenting involves providing emotional support and creating a nurturing environment for children. This helps children develop a strong sense of self-esteem, resilience, and emotional well-being. When children feel loved, valued, and supported by their families, they are less likely to turn to substances as a way to cope with emotional difficulties or to seek validation.
References


