

PSYCHOLOGICAL MINDEDNESS AND SOCIAL FUNCTIONING OF INDIVIDUALS WITH ALCOHOL DEPENDENCE SYNDROME: A COMPARATIVE STUDY

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ABSTRACT

Background: Alcohol abuse is a major public health concern. Various biological, psychological, and social determinants are there in the well-being of an individual. **Aim:** The present study aims to assess the impact of psychological mindedness and social functioning on the well-being of patients with alcohol dependence syndrome. **Method & Materials:** 30 individuals with Alcohol Dependence Syndrome and healthy normal were selected through purposive sampling. Well-being was assessed using the Psychological Mindedness Scale and Social and Occupational Assessment Scale among both groups and statistical operations were done using the Independent Sample t test and Pearson Correlation Coefficient . **Results & Conclusion:** Study suggest that significant differences were observed in terms of psychological mindedness and social functioning. It was concluded that the well being is negatively affected due to less psychologically minded and difficulty in social functioning. Further a holistic approach can be done to improve the wellbeing.

Keywords: Alcohol, psychological mindedness, social functioning, well being

INTRODUCTION

Well-being can be described in terms of an individual's condition concerning the psychological, social, and biological basis. It has been defined the health as "the full physical, mental and social well being not merely the absence of disease or infirmity (WHO, 2001). Various determinants are there in the well-being framework, One among them is interpersonal relationships. It has been studied that the well-being of individual is affected due to the consumption of alcohol despite the pattern of drinking (Nguyen & Cairney, 2013).

Consumption of alcohol among the young

adults has been a complex phenomenon, which is deeply interconnected with biological, psychological, social and cultural factors. It plays a major in the lives of adults in the world wide such as a celebrating agent to coping agent. In many cultures across the world, consumption of alcohol is acceptable socially. social or experimental phase of consumption is leading to have less consequences but abusive to dependence phase of consumption lead to have destructive consequences in the individual.

Severe pattern of consumption of alcohol results major consequences. In the medical

background, it has been studied that excessive consumption of alcohol lead to have a destructive consequence and which could be a life threatening (Clark et. al., 2001) The social ground has been destructive due to the excessive consumption of alcohol and that might lead to have significant distress in the individual (Vinader-Caerols, 2014). It is severely affected in occupational phase of the individual in terms of increased absenteeism; where they are on sick leave and shows less interest in the work and more interest in consumption of alcohol. Work related accidents, less productivity at work and difficulty in maintaining healthy relationship with colleagues and which may further result in unemployment due to excessive drinking (MacDonald and Shields, 2001) . It has been observed that the mindset of individuals struggling with alcoholism fluctuate widely. They experience a sense of distress where a preoccupied thoughts of drinking alcohol dominate their mental space. Substance addiction is a chronic, relapsing brain disease that is characterized by compulsive drug seeking and use, despite harmful consequences(National Institute on Drug Abuse, 2007). The social ground has been destructive due to the excessive consumption of alcohol and that might lead to have significant distress in the individual. Where the individual faces a difficulty in understanding the perspectives of others (Gustafson, 1988).

Psychological mindedness defines as an individual's ability to understand one's own and other's mental processes. It can be further explained as Willingness to try to understand oneself and others, openness to new ideas and capacity to change, access to feelings, belief in the benefits of discussing one's problems, and interest in meanings and motivation of own and others' behavior Shill and Lumley (2002). The purpose of the current case study is probe into the impact of social

functioning, severity of addiction and psychological mindedness on the well being of individual with alcohol dependence syndrome.

OBJECTIVE

To assess the impact of psychological mindedness and social functioning on the well-being of patients with alcohol dependence syndrome.

METHODS & MATERIALS

Sample: Male Participants were selected randomly from a de-addiction centre of south part of India. There were 30 participants with the Alcohol Dependence Syndrome and 30 healthy normal controls. The age range of the patient was between 25-35 years with the minimum education of 8th std. The patient is having less than 2 years of dependence co-morbid substance abuse history, other co-morbid psychiatric disorders, mental retardation and organic history were excluded.

Assessments: Socio-demographic and Clinical Data Sheet was used for the information about socio-demographic variables like age, education, residence, occupation and clinical variables like age of onset of illness, duration of illness. Psychological Mindedness Scale (Conte et al., 1996), a 45- item self-report instrument with items rated on a 4-point was used for assessing the psychological mindedness. The Social and Occupational Functioning Assessment Scale (Morosini, 2004) was used to assess the routine functioning. And Severity of Alcohol Dependence Scale (SADQ) by Stockwell (1983), 20-item questionnaire, was used to assess the severity of the dependence.

Procedure: 30 participants with Alcohol dependence and healthy normal controls were taken. The assessments included Socio-demographic profile, Psychological

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Mindedness Scale, The Social Occupational Functioning Scale, and Severity of Alcohol Dependence Questionnaire.

RESULTS

The present chapter gives the results of the analysis of the data of the present study. The data analysis was done using the Statistical Package for Social Sciences (IBM SPSS-27.0 Version) software.

Table 1.1: Comparison of Various Socio-Demographic Variables Across Both Groups (N=60) (continuous variables)

Variables	ADS	HNC	t	p
Mean ± SD				
Age	31.37±3.55	30.83±2.89	.638	.526
Education	12.90±2.83	12.97±2.73	-.093	.926
Family Income	12266.66 ± 3881.5	9866.66 ± 3481.92	1.227	.230

Note: ADS – Alcohol Dependence Syndrome, HNC – Healthy Normal Controls

Table-1.1 shows the comparison of the two groups in their continuous variables by using Independent sample t test method. This shows that the two groups did not differ significantly in the following variables assessed.

Table 1.2: Comparison of Various Socio-Demographic Variables and clinical variables across both Groups (N=60) (Discrete variables)

VARIABLE		N (%)		X ²	P
		ADS	HNC		
Marital status	Married	24(57.1%)	18(42.9%)	2.857	.158
	Unmarried	6(33.3%)	12(66.7%)		
Occupation	Employed	24 (80%)	27 (90%)	1.176	.472
	Unemployed	6 (20%)	3 (10%)		
Habitat	Rural	19 (63.3%)	18 (60%)	.071	1.000
	Urban	11 (36.7%)	12 (40%)		
Family Type	Joint	20 (66.7%)	8 (26.7%)	9.643	1.000
	Nuclear	10 (33.3%)	22 (73.3%)		

Table 1.2 shows the Pearson chi-square was used to compare the discrete variables. This shows that the two groups did not differ significantly in the following variables assessed.

1.3 Table: Clinical Variables of Alcohol dependence syndrome (N=30) (continuous variables)

VARIABLE	AGE OF ONSET (years)	DURATION OF ILLNESS (years)	SADQ
Mean ± SD	14.23±3.76	17.83±2.93	25.07 ± 5.27

Note: SADQ – Severity of Alcohol Dependence Questionnaire

The 1.3 Table shows the mean ranges of age of onset, duration of illness and severity of alcohol dependence. This explains that patients with alcohol dependence have moderate level of dependence.

Table 2: comparison of the scores of socio and occupational functioning.

VARIABLE	Mean ± S.D.		t	p	Cohen's D
	ADS (N=30)	HNC (N=30)			
SOFAS	63.93±9.850	88.33±3.889	-12.619	.001**	-3.258
PMS	118.30±10.202	125.10±7.471	-2.945	.005**	-.761

**indicates significance at 0.01 level

Table 2 shows that shows the comparison of the scores of socio and occupational functioning, psychological mindedness and mentalization between patients of alcohol dependence syndrome and healthy normal controls using independent sample 't' test. Both group showed a significant difference in the scores of social and occupational functioning (P < 0.01) and psychological mindedness (P < 0.01). with regards to the scores of domains of mentalization, both group did not differ significantly.

Table 3: Correlations of Sociodemographic and Clinical Parameters with severity of alcohol dependence, social and occupational functioning and psychological mindedness of patients of alcohol dependence syndrome (N=30).

	AGE	DURATION OF ILLNESS	AGE OF ONSET	SAD-Q	SOFAS	PMS
AGE	1					
DURATION OF ILLNESS	.806**	1				
AGE OF ONSET	0.037	-0.199	1			
SAD-Q	0.257	0.317	-0.005	1		
SOFAS	-0.071	-0.264	0.244	-.551**	1	
PMS	0.132	0.124	0.015	-0.163	.363*	1

**indicates significance at 0.01 level, *indicates significance at 0.05 level

Table 3.: shows the Pearson's correlations of Sociodemographic and Clinical Parameters

with severity of alcohol dependence, social and occupational functioning and psychological mindedness of patients of alcohol dependence syndrome. There is significant positive correlation between the age and duration of illness ($r=.806^{**}$), indicating that as the age increases the duration of illness of also increases. Psychological mindedness is significantly correlated positively with social and occupational functioning ($r=.363^{**}$). This suggests that the more they are psychologically minded the more they are able to be involved in social and occupational functioning. Further, severity of alcohol dependence is significantly correlated negatively with social and occupational functioning ($r=.363^{**}$).

DISCUSSION

The present study showed that there are young adults who have developed alcohol dependence and their overall well-being is affected. It has been noted in the study that the age which the patients started consuming alcohol is adolescents (Mean of 14.23 ± 3.76). In the current scenario, the prevalence of alcohol consumption in India is about 20% of adolescents aged 15 to 19 years (Kumar et al., 2016). A significant difference ($p=.019^*$) was found in religion among both group.

The present study also showed that the patients with alcohol dependence (63.93 ± 9.850) have more problem in social and occupational functioning than controls (88.33 ± 3.889). This could be due to that alcoholics show significant impairment in social and occupational functioning. It affects their interpersonal relationships, emotional regulation, productivity of the job, increases the absenteeism and mainly performance of cognition. Similar study has noted that severity of alcohol dependents affects their social functioning. Also, it resulted that as the stigma which are internalized regarding the illness

increases about their, social functioning decreases (Arabaci, 2020). Alcohol dependents seem to be less psychologically minded than healthy normal. This states that the difficulty to understand the mental process of them as well as others. It was also studied that social and occupational functioning was significantly correlated positively with psychological mindedness ($r=.363^*$) and negatively with severity of alcohol dependence ($r=-.551^{**}$). This can be further explained as the more they are psychologically minded, the more they are able focus on their social and occupational functioning. Ferrer and Marks (2016) studied that the more the person is aware about their psychological processes, lesser the chance to develop the dependence in alcohol. This was reasoned to assume that those with higher awareness of the self are more able to execute their cognitive functioning and further it helps to prevent them from excessive consumption of alcohol. The severity of dependence increases impairment in interpersonal relationship, communication, mental processes, and work related issues such as difficulty in engaging in their duty, co-operative atmosphere with co-workers.

In this study, individuals with alcohol dependence are less psychologically minded. This may create a difficulty in being open to new ideas and capacity to change, accessing to feelings and understanding about themselves and others. They face hurdles in dealing with daily life that may be affecting their social sphere and occupational space. They fail to have an adequate interpersonal relationship, communication, good performance at their work place. Due to this, the well being is affected and results in experiencing severe psychological distress. And Cecero, Beitel, and Prout (2008) studied the psychological mindedness can be seen as an increment in coping skills and reduction in the distress. Further, the present study

indicated that patients with alcohol dependence who are less minded, the coping mechanism is affected, that may lead to them engaging in substance seeking behaviour as a part of coping.

CONCLUSION

This study highlights that patients with severity of alcohol dependents lead to have difficulty to be minded of their own mental processes and profoundly impaired social and occupational functioning. The well being is negatively affected due to their strained interpersonal relationships, communication, increased absenteeism and less productivity. A holistic approach can be done to improve the well being of the patients with alcohol dependents using the influence of psychological state, reducing alcohol seeking behavior and social and occupational functioning.

LIMITATION

The present study is limited to only 60 participants that may not be giving a adequate representation of the cohort with alcohol dependence syndrome. And, the study focused on only male participants and that may suppresses the general applicability of the findings to the other genders.

REFERENCES

Arabaci, L. B., Dagli, D. A., Tas, G., & Arslan, A. B. (2020). Stigmatization and social functioning levels of patients with alcohol use disorders. *Journal of Addictions Nursing, 31*(4), 295-301.

Cecero, J.J., Beitel, M. and Prout, T., 2008, Exploring the relationships among early maladaptive schemas, psychological mindedness (PM) upon the relationship between early maladaptive schemas (EMS) and self-reported college adjustment.

Psychology and Psychotherapy: Theory, Research, and Practice, 8, 105-118.

- Clark, D. B., Lynch, K. G., Donovan, J. E., & Block, G. D. (2001). Health problems in adolescents with alcohol use disorders: self report, liver injury, and physical examination findings and correlates. *Alcoholism: Clinical and Experimental Research, 25*(9), 1350-1359.
- Conte, H. R., Ratto, R., & Karasu, T. B. (1996). The Psychological Mindedness Scale: Factor structure and relationship to outcome of psychotherapy. *The Journal of psychotherapy practice and research, 5*(3), 250.
- Ferrer, E., & Marks, R. (2016). Predicting alcohol use in a cohort of college students based on psychological mindedness, counseling, and demographic variables. *International Journal of Psychology and Behavioral Sciences, 6*(2), 39-46.
- Kumar, V., Kumar, D., Shora, T. N., Dewan, D., Mengi, V., & Razaq, M. (2016). Prevalence of tobacco, alcohol, and other drug abuse among school-going male adolescents in Jammu. *International Journal of Medical Science and Public Health, 1*(5), 246-51.
- MacDonald, Z., & Shields, M. A. (2001). The impact of alcohol consumption on occupational attainment in England. *Economica, 68*(271), 427-453.
- Morosini, P. L., Magliano, L., Brambilla, L. A., Ugolini, S., & Pioli, R. (2000). Development, reliability and acceptability of a new version of the DSM IV Social and Occupational Functioning Assessment Scale (SOFAS) to assess routine social functioning. *Acta Psychiatrica Scandinavica, 101*(4), 323-329.

- Nguyen, O. K., & Cairney, S. (2013). Literature review of the interplay between education, employment, health and wellbeing for Aboriginal and Torres Strait Islander people in remote areas.
- Shill, M. A., & Lumley, M. A. (2002). The Psychological Mindedness Scale: Factor structure, convergent validity and gender in a non psychiatric sample. *Psychology and Psychotherapy: Theory, Research and Practice*, 75(2), 131-150.
- Stockwell, T., Murphy, D., & Hodgson, R. (1983). The severity of alcohol dependence questionnaire: its use, reliability and validity. *British journal of addiction*, 78(2), 145-155.
- Vinader-Caerols, C., Monleón, S., & Parra, A. (2014). Physiological and psychological effects of a high dose of alcohol in young men and women. *Adicciones*, 26(3), 238-246.
- World Health Organization. (2001). *The World Health Report 2001: Mental health: new understanding, new hope.*

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