

Education on Early Parent-Child Relationship and Substance Use Disorder in Adulthood

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Abstract

Over the years studies have shown that early experiences have a significant impact on a child's subsequent cognitive, emotional, and social development, affecting individual health in adulthood. In addition, it is believed that there is a link between early parent-child relationship and the externalization of maladaptive behaviours later. This might be manifested in high-risk behaviours in adolescence and adulthood including drug addiction.

This study was conducted to better understand the early parent-child relationships among heroin addicts. To explore this, 30 subjects (4 females and 26 males) that are receiving methadone maintenance treatment at the Action Plus Center in Tirana were selected. Qualitative research was conducted through personal interviews and self-report questionnaires.

Findings shows that early child-parent relationship in heroin addicts is mostly characterized by a negligent father and a closer relationship with the mother. Results

indicate that mother figure often appears to be the abusive and critical parent and there is a lack of father figure in child's life. Other interesting findings in this study suggest that heroin addicts may use drugs to fulfil or stay in balance with unmet needs related lack of parental love and warmth, emotional and psychological support, emotional stability, lack of open communication, low self-esteem, and self-confidence. These findings are relevant cause there is a practical application in substance use disorders treatment.

Keywords: *early childhood experiences, early parent-child relationship, heroin addiction, substance use disorder, enmeshment, parent enmeshment*

Introduction

Addiction as a behaviour but also addiction to narcotic substances, is a very complex phenomenon that involves physiological processes, psychological mechanisms, and individual-environmental experience. For many decades, researchers have focused on triggering and common causes of drug experimentation and drug abuse. The data show that 80-90% of heroin addicts relapse (NIDA, 2018). Addiction is a chronic disease which is characterized by compulsive behaviour, constant loss of control and constant use of the substance, despite the negative consequences (Coombs, 1997; Smith & Seymour, 2001). Furthermore, studies that show that after many years of successful bariatric surgery (weight loss), doctors report that patients are substituting compulsive overeating with a new acquired disorder such gambling or alcoholism (Blum, 2013) or heroin addicts replace heroin with alcohol (Anglin, Almog, Fisher & Peters, 1989; Hser, Anglin & Powers, 1990). This can raise other questions about the roots of this disorder. In fact, previous studies focused on understanding genetic, personality, environmental factors such as trauma, childhood abuse, social / peer pressure or culture, family conflicts, health problems, attachment, and parenting styles, but there is gap in the literature concerning enmeshment. Since many studies emphasize the importance of early experiences in people who develop addiction disorders in the future, this research framework is designed to explore the early relationships in the family of origin and heroin addiction.

Purpose of the study

This study aims to explore the early parent-child relationship and enmeshment in heroin-addicts to better understand its impact on later adulthood. For this

purpose, a sample of 30 subjects who are on Methadone Maintenance Treatment in Action Plus Tirana center was chosen to participate in this study.

Objectives of the study

1. To understand how parental enmeshment in heroin addicts looks like.
2. To investigate the causes and reasons for experimenting with heroin.
3. To describe the origin of addiction from the addict's perception.
4. To explore the interaction between unmet needs, drug/heroin use and enmeshment.

Hypotheses and research questions

Hypothesis: People with parental enmeshment tend to become addicted to heroin and have more difficulty than others of overcoming addiction. This study will attempt to address the following research questions:

1. How does enmeshment in heroin addicts look like?
2. What are the reasons for experimenting with heroin?
3. What is the perception that heroin addicts have about drug addiction problem origin?
4. If enmeshment is closely related to addiction, what does the drug compensate in heroin addicts related to unmet needs?

Relevance of the study

This clinical population is one of the less studied populations in our country. It was decided to conduct a qualitative study on heroin addiction and early parental-child relationship. The problem with heroin addiction can be the tip of the iceberg itself and a maladaptive behavior that comes because of untreated problems early on.

Lliterature review

Characteristics of opioid abuse and heroin addiction

Heroin is 2-3 times stronger than morphine, it's an opioid drug categorized as depressants a drug that creates addiction faster than any other type of substance.

Substance use in women tends to develop into addiction faster than in men. (NIDA. 2021). Long-term heroin abuse can affect decision-making, control behaviour, the ability to cope with stressful situations (Liu, Qin, Yuan, Li, Wang, Lii & Tian, 2011 Cicero, Ellis, Surratt & Kurtz, 2014). High doses increase social interaction but decreases it during abstinence (García Pardo, Roger Sánchez, De la Rubia, & Aguilar Calpe, 2017) and long-term heroin abuse can also lead to mental disorders such as depression and antisocial personality disorder (NIDA, 2021).

Biological perspective (Genetic vulnerability to drug addiction)

According to many studies, drug addiction is attributed to genetic factors at the rate of 50% to 60% of the tendency to become addicted and ability to quit (Heath, Bucholz, Madden, Dinwiddie, Slutske, Bierut, Statham, Dunne, Whitfield & Martin, 1997; Tsuang, Lyons, Meyer, Doyle, Eisen, Goldberg, True, Lin, Toomey & Eaves, 1998; Kendler, Prescott, Myers & Neale, 2003). It is believed that environmental factors play an important role in drug experimentation, while genetic factors play a greater role in the transition from regular use, abuse and developing addiction (Vink, Willemsen & Boomsma, 2005). Biological theory explains that repeated long-time exposure to drugs can cause chemical imbalance changing brain structure (Nestler, 2013).

General theory of opioid addiction

This theory arose as a need to find an explanation for addiction that could be generalized to all those who use opioid drugs, regardless of whether user is a physicist, a homeless, a patient, etc. The general theory of opioid use emphasizes the dominant and fundamental characteristics of addiction and the cause-and-effect process that results from opioid use. The drug produces such a powerful effect in anyone who assumes it, giving craving for more and creating so physical dependence. The person is going to use drug again, to avoid withdrawal symptoms (Lindesmith, 1968).

The ego / self-theory of substance dependence

A contemporary psychoanalytic approach explain addiction based on interaction between person's ego, sense of self and drug effect. According to ego / self-theory, drug users are individuals with ego function deficits. Consequently, the choice of narcotic substance is not something random, but responds to specific psychological protective needs and ego compensation. Substance selection is determined by the

interaction between disturbing affective states, individual experiences, and efforts to alleviate this condition through drug pharmacological effect. (Khantzian, 1978).

Theory of Cognitive-Affective-Pharmacogenic Control

The Cognitive-Affective-Pharmacogenetic Control theory underline the interaction of cognitive-affective-pharmacogenic effects of substance taking (Coghlan, Gold, Dohrenwend & Zimmerman, 1973) suggesting that drug abuse starts with an inner conflict which is the influencing factor. People who have difficulty fulfilling demands and expectations placed upon them by society or by themselves, may experience internal conflict. That cause stress, anxiety, and a sense of powerlessness to react, where the level of anxiety is different in each person, depending on the personal experience and perception. This theory explains that it is not the experience of anxiety itself, but the belief that the person is unable to change or control a certain situation and feeling helplessness to cope with stress. This could lower self-esteem, which is very common among drug users and abusers (Krystal & Raskin 1970).

Early maladaptive schemes and opioid abuse

Maladaptive schemes refer to long-term patterns of emotional and cognitive self defense that develop during the first years of life. The individual filters and processes information through these cognitive structures and this process guides the individual's behaviour. The more dysfunctional the scheme used to interpret reality, the more dysfunctional is the person's behaviour. It is thought that these maladaptive schemes formed in childhood, may lead to psychological distress directly or indirectly in the future such as anxiety, depression, eating disorders, etc. (Nicol, Mark & Murray, 2020). Additionally, maladaptive schemes develop when essential universal psychological needs such as (secure attachment, autonomy, and freedom to express needs and emotions, setting boundaries on reality) are not met (ibid). These unmet needs usually act subconsciously by making the person psychologically vulnerable to depression, anxiety, dysfunctional relationships, psychosomatic disorders, or addiction (Young, 1999).

Parenting style and substance use disorder

Some research findings show that there is a link between parenting style and adolescent high-risk behaviors based on children's perception of parenting style (Schweitzer, & Lawton, 1989) Additionally, a study among heroin users in prison, participants reported their parents as very tolerant, very permissive, lack of father

figure and over-protective moms (Kokkevi & Stefanis, 1988). Overprotective parenting is highly associated with heroin addiction and is considered a high-risk factor (Durjava, 2018).

Other studies showed that adolescents whose parents had a negligent or authoritarian parenting style had a higher risk of smoking and / or drug use (Radziszewska, Richardson, Dent & Flay, 1996; Myers, Newcomb, Richardson & Alvy, 1997; Stephenson, Quick, Atkinson & Tschida, 2005; Patock-Peckham & Morgan-Lopez, 2006). Moreover, a study on heroin-dependent individuals receiving methadone maintenance therapy and a group of healthy subjects, the results regarding participant's parents, showed that there was a high prevalence of emotionally cold fathers and over-protective mothers (Anderson & Eisemann, 2003). Also, heroin-dependent individuals reported higher levels of maternal and paternal protection when compared to the control group and alcohol dependence group (Bernardi, Jones, & Tennant, 1989). Indifferent and coldness or interfering in child's life trying to control it, there is a high for their kids to develop addiction (Schweitzer et al., 1989). Additionally, there is a correlation between drug-addicts mother's, emotional attachments, and overprotectiveness (Baron, AbolMagd, & El Rakhawy, 2010). Additionally, study conducted last year in heroin addicts, showed that most of them had overprotective mothers and absent father-child relationship during childhood age. According to this study, heroin addicts were characterized by ego damage, a narcissistic mother, lack of father figure, family dissatisfaction and communication problems (Hoxha, 2020).

Enmeshment

Enmeshment is concept introduced by Salvador Minuchin in 1974, to describe lack of bounders between family members interrupting so personality development and slowing down maturation process. It is a model model that leads to psychological and emotional fusion between family members. It is suggested a moderate level of closeness and a moderate level of separation from family members, allows the child in adulthood to feel both free to leave the family without feeling guilty or excessive responsible to the parent, as well returning to the family to provide and receive support. This level of closeness allows the individual to develop his own personality. In enmeshment, the child's personality is "swallowed" by the parent's personality and the end-result of this process. is a child who develops fear of experimentation, fear of failure and fear of success (Barber and Buehler, 1996).

Methodology

Choosing a Qualitative Research Approach is very useful to study this clinical population, allowing to obtain complete information and providing a better understand and explain the research problem. Closed and open-ended questions were used to obtain descriptive but also explanatory information. which is very necessary to understand how drug users perceive themselves and surrounding environment, making so possible the interpreted of their behaviour. Qualitative research facilitates this process, enabling researchers to understand addiction from the perspectives of participants (Neale, Allen, & Coombes, 2005).

Participants

Sampling this clinical population was intentional and criteria for the selecting sample are (1) Having a history of heroin addiction (2). Being on methadone maintenance treatment therapy, (3) Having not less than three months in methadone therapy. These criteria were determined in accordance with the research purpose. Regarding the third criterion, it was established to maximize as much as possible validity and reliability of the research, since 3 months is relatively enough time to be physically, psychologically, and emotionally stable. Thirty participants attended the study (26 males and 4 females) from 20 years to 57 years old. A sample of 30 subjects was selected because the 15-30 interval is considered an appropriate number to reach thematic saturation in qualitative data analysis (Creswell, 1998; Safman & Sobal, 2004). From 30 participants 3 of them (2 female and 1 male) were selected for extended interviews. The selection was made based on parent enmeshment checklist results. First participant was highly enmeshed with the mother, the second one was highly enmeshed with his father, and the third subject was not enmeshment with any parent. This selection was made to provide an overview of the three-enmeshment pattern emerged from this study, to further explore the interaction of this phenomenon with drug addiction and better understanding similarities and differences between them.

Instruments

There were used 3 instruments to collect data in this study. The Parent Enmeshment Checklist and The Addiction Questionnaire designed by the researcher himself was used to answer research questions 1, 2 and 3. Both above-mentioned questionnaires were applied to the whole sample, while to answer

research question 4, The Life Course Perspective on Drug Use was used. The instruments were piloted first, and the relevant adjustments were made before the data collection.

The Drug Addiction Questionnaire designed by the researcher contains questions about the early experiences in childhood, adolescence, drug experimentation, perception on the origin of the problem of dependence from the interviewee's perspective, etc. The Parent Enmeshment Checklist which is a non-standardized instrument which is used to obtain qualitative data about parental enmeshment. It is a checklist, completed from a historical perspective, to see how the individual felt during childhood. This questionnaire includes three sections: a) Indication of an Overly Close Parent-Child Bond which includes 15 statements; b) Indication of Unmet Adult Needs which consists of 10 statements and c) Indication of Parental Neglect or Abuse which consists of 10 statements. The subject must respond from a historical perspective and put a checkmark one of the words (mother, father, stepmother, stepfather, nanny carer) and add an additional comment.

The third instrument is the format of the Assessment Interview on Heroin Addiction, starting from the perspective of the course of life, consists of two parts: a) demographic questions b) life course and questions about addiction. The second part of the interview considers: family of origin, school experience, relationship with other family members, first exposure to drugs, experiences that the individual considers as important to the development of addiction and the treatment process, giving thus a complete overview of the phenomenon and its contexts (Connidis, 2011)

Procedure

Data collection was divided in two parts and lasted 1 month. First part was conducted through questionnaires with the entire sample, after that the data entered to excel was done by diving into categories. The second part includes extended semi-structured interviews was conducted with 3 subjects selected from this sample and thematic analysis was used to analyse the data obtained from the interview.

Ethical consideration

For the realization of the questionnaires, the anonymity of the participants was strictly guaranteed and the oral informed approval. During the study, given that we are dealing with individuals particularly vulnerable and data information can affect many sensitive issues were considered ethical issues for the participants as follows: It has been explained every step of the procedure, anonymity was

guaranteed, it has been explained them the right to refuse answering and sharing as much as they feel to, and participants have been informed that they can access the results of the study. Before starting data collection, the verbal informed consent has been obtained. During the process, interviewer tried to maintain an encouraging attitude during the interview.

Results

This study investigated enmeshment and heroin dependence in adulthood where the focus was early parental relationships in the family of origin. Regarding to enmeshment in heroin addicts, results showed that 23 of the participants in this study have enmeshment at least one parent and 7 others do not have enmeshment (fig.1). It was noticed that enmeshment with the mother, is expressed not only as a closer relationship, but mother figure appears to be also the critical and abusive parent (fig.2), while the father mostly appears to be the negligent parent and not present figure in child's life (fig.3).

Concerning the experimentation reason with heroin, results are as follows: 19 participants said it was curiosity, 4 to fit into society, 3 said family problems, 1 social problems, 1 to escape from reality, 1 to relieve physical pain, 1 monotony, 2 to calm down from cocaine and 1 many reasons together.

Additionally, nearly half of the participants think that childhood has sufficiently or greatly influenced the development of heroin addiction. The rest associate the problem of addiction with adolescence and only a small part associates this problem with adulthood by giving contradictory or inconsistent answers. Most of them fail to identify the origin of the problem, which was expected, considering the complexity of drug addiction cycle, and overlapping maladaptive behaviours.

Regarding the results of the three extended interviews, subject 1 (K.A) and 3 (D.M) that are enmeshed with one parent showed low self-confidence and self-esteem, not being able to communicate their thoughts and feelings to the parents, and they reported that they didn't feel loved.

Some retrieved statements from interviews regarding unmet needs

"He never knew how to express his love...I guess he thinks that this is for weak people"

"I just wanted to leave home forever..."

"...my father's behaviour ... he was very violent and full of anger."

"My mother and I could never say how we felt in my father presence"

"I often acted accordingly, just to ... avoid his irony and criticism"

“He (the father) uses to hurt my feelings since forever...never said a sweet word to me”

“I almost always asked for his approval before doing something... and I was afraid of his disapproval and criticism...”

“Nothing I use to do ok for my father, I was never good enough.”

“I do not know but I never open up myself to him because of the wall raised between us.”

I have never heard my mom saying that she loves me ...never...”

“My father use to be very strict and we could never do jokes or freely talk when he was home...”

“My mother use to be very critical to me, yelling and offending...I guess she was just tired taking care of us and working so much, my father was never home”

“My mother use to be afraid of my father reaction...”

“My parents use to fight each-other all the time, I could' wait to leave...”

Regarding subject 2, (A.L) he is not enmeshed with any parent, and did not show or report any of these problems, on the contrary, he reported a very happy family environment, almost perfect. Although, all interviewed reported that using heroin make them feel free from worries, like they could do or achieve everything they want, by seeing world as a better place and feeling inner peace.

Discussion

These results are consistent with other studies suggesting that there is a link between drug addicts in strong emotional attachments to the mother and maternal overprotectiveness (Bernard et al. 1989; Baron et al. 2010; Hoxha,2020). Also, the predominance of father figure negligence resulted in this study is in a similar line of argument with other studies with heroin addicts (Kokkevi et al. 1988; Hoxha,2020). Although, this might be explained Albanian culture context and the difficult economic situation, when the father is mostly working or emigrating to provide the economic security to the family and mother must deal with children education, and this might lead her to criticism and overprotection in parent-child relationship.

Although the results cannot be generalized, findings can suggest that when parent enmeshment is present, the unmet needs of the child are present more than in cases where parent enmeshment does not exist, and the risk of becoming addicted to narcotics may increase when these conditions coexist. This can be explained by the fact that enmeshment can lead to communication breakdown, hindering the self-differentiation process. Additionally, the child represses his needs, desires, and

aspirations, trying to satisfy the parent, and the parent unconsciously tries to fulfil his unmet needs through the child. The parent thinks that he is helping the child making the right choices, by not letting him / her to freely explore and interact with the surrounding environment. The more the parent intervenes in this process, the more the self-differentiation and maturation of the child's personality is hindered.

It can be speculated that this can later lead to unmet childhood needs which in some cases, can be externalized into maladaptive behaviours in adulthood, such as substance use disorders. Literature also suggests, unmet needs subconsciously act by making the person psychologically vulnerable to anxiety, dysfunctional relationships, depression, psychosomatic disorders, or addiction (Young, 1999). Moreover, parental enmeshment and the unmet needs of the individual do not facilitate overcoming addiction, because the child may continue to operate in adult age, with the same maladaptive schema that was consolidated during early parent-child relationship.

Besides, addiction is a very complex phenomena, and someone does not become addicted randomly (Khantzian, 1978). From the data obtained from the interviews, the individual-environment maladaptive schema, is obvious, and under certain assumptions, this can be construed as persons who develop a strong ego can be well-adapted to the environment while those who have ego disturbance using non-flexible schemes. If referring to parental love and warmth and parental encouragement of self-confidence and self-esteem to his child, it should be noted that these factors play a key role in strengthening the ego of the child. Drug use in these individuals (as the ego/ self-theory of substance abuse explains) responds to specific psychic defences and ego compensation needs: Instead of being able to identify their unmet needs, they repress them, and this makes them even more vulnerable.

Furthermore, heroin effect gives an exaggerated sense of power and boosts of self-confidence. The individual thinks that he can do everything he could not do before, replacing the feeling of helplessness with the feeling of euphoria. This is also noticed by the reports of the interviewees follow the same line of argument of Cognitive-Affective-Pharmacogenic control theory, which explains that the substance relieves anxiety and makes them feel good about themselves by giving the user the feeling that he already has the power and competence to control the surrounding environment (Krystal et al.1970).

The coexistence of enmeshment-unmet needs - drug use - maladaptive behaviour, needs further exploration in future studies, to better understand whether these individuals tend to develop drug addiction and have more difficulty to overcome addict the cycle of dependence rather than individuals who do not have parental enmeshment.

Limitation

Dealing with a target group that is often stigmatized and marginalized might lead to incomplete or manipulative responses and in some cases, idealization of family of origin was noticed. Also, some of them might be using other drugs or may have comorbid conditions. Another limit to consider are the non-standardized instruments and one of them is designed by the researcher himself and not by a group of experts. Also, in qualitative method, subjectivity of the researcher might be considered as well. Another limit of this study is that results cannot be generalized in this clinical population and cause of the gap in literature, it is not possible to compare this study with the data of other studies.

Conclusion

This study aims to explore the early parent-child relationship and enmeshment in heroin-addicts to better understand its impact on later adulthood. The hypothesis of this study was: People with parental enmeshment tend to become addicted to heroin and have more difficulty than others to rehab.

The findings of this study showed that: 23 heroin-dependent individuals who participated in this study results having enmeshment with at least one parent, while 7 of them did not have parental enmeshment. Depth semi-structured interviews results, suggest that they use drugs to compensate for some unmet needs, which include psychological and emotional support, parental love and warmth, emotional stability, open communication, and encouragement. self-confidence and self-esteem of the child by the parent.

Additionally, most of the heroin-dependent individuals surveyed are unaware of the origin of the problem attributing to other factors and overlapping problems that come as result of the individual – drug – environment interaction.

The findings of this study have practical application in substance use disorders treatment. Focusing on the early parent-child relationship, enmeshment and bringing to attention unmet needs, is of particular importance for the treatment of individuals surveyed. Since these individuals might be unaware of their needs, might develop rigid defence mechanisms that allow them to stay in psychological balance with their inner needs and addiction. By bringing these needs into conscious awareness and exploring parental enmeshment in drug / heroin addicts, is important in the process of psychotherapeutic treatment and drug rehabilitation. This research can be helpful to participants, to the drug rehab center where it was

conducted, to people struggling with heroin addiction and their families, as well as addiction experts.

Suggestions

Regarding parents, It is recommended that patient and parents get well- informed and educated on enmeshment and its consequences it may have on the child's personality. It also very important to maintain a consistent family environment concerning psycho-emotional needs of the child and emotional stability.

It is recommended that therapist help the patient exploring and identifying unmet needs and understanding the origin of the problem by repairing ego damage, developing effective defense mechanisms and using adaptive schemas. Furthermore, family involvement in therapy, is recommended, because parental enmeshment occurs in certain context which is the family environment and individual therapy, and family therapy is needed. It is important to include the parent with whom the child has enmeshment, to gradually define individual personal boundaries of the person suffering from addiction and create gradual separation from the family of origin while maintaining proper psycho-emotional closeness to him. Psychodynamic therapy approach might be used in enmeshment cases and behavioural cognitive may be appropriate in cases with no enmeshment but mostly maladaptation.

Regarding drug rehab systems and services, Increase the number of drug rehabilitation centers, both public and private and when it is possible to build up residential community drug centers that enable the treatment of drug addiction even for people who cannot afford other rehabilitation programs. Additionally, increase the number of well-trained psychotherapists and including community psychologist in academic profiles It is also very important to organize mini parent training for free by the state (since not everyone can afford to pay for trainings) to better inform and educate parents on this phenomenon. Inserting drug addiction profile in academic curriculum program

Suggestions for Future Research; Quantitative studies can be conducted to further explore drug addiction, enmeshment, and unmet childhood needs. Also, qualitative, or quantitative studies can be designed to better understand enmeshment and other addictive behaviours. It is also important to consider the opposite of enmeshment phenomena called disengagement, can be further explored, and studied since this phenomenon is just as problematic (perhaps even more) than enmeshment.

FIGURE 1. General enmeshment overview

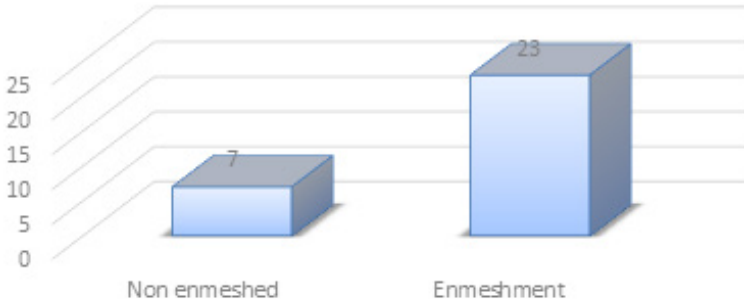


FIGURE 2. Critical and abusive parent

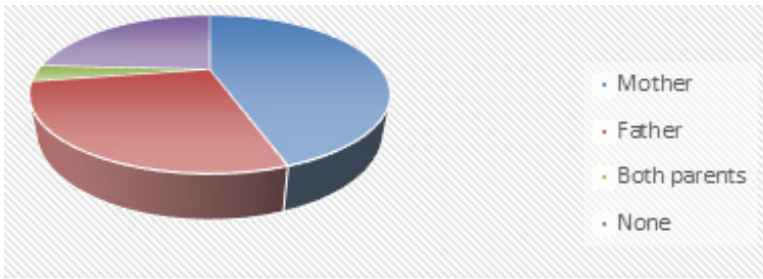
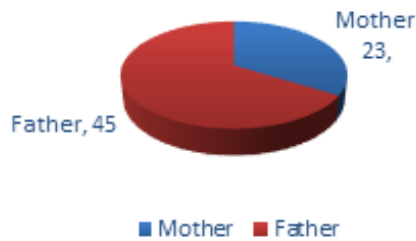


FIGURE 3. Parental negligence

Reported parental negligence expressed in frequency values



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