EFFECTIVENESS OF FAMILY-ORIENTED INTERVENTION WITH ALCOHOL ADDICTS.

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Introduction

For families, workplaces, and society as a whole, alcoholism may be a complex and damaging behaviour. Approximately 20% to 30% of the population in India consumes alcohol in a harmful manner, according to epidemiological studies.

Having a big amount of alcohol in one's system might have a negative impact on one's family. A person's level of negative impact varies from person to person and family to family. A person's emotional and physical well-being might be adversely affected by this. Family intervention treatments have just recently been introduced in the realm of alcoholism. Because of his alcoholism, the alcoholic may already feel alienated and dependent on family members who voice their disapproval of his behaviour.

When loved ones, friends, family members, neighbours, coworkers, and employers encourage an alcoholic to get professional help, they are more likely to do so. A divorce, being fired, an accident from a fall, or any other threat to his well-being could be the reason why he's afraid. Those who receive both pharmaceutical and nonpharmacological treatment for alcoholism have better outcomes, according to studies. However, these studies focused mainly exclusively on a subset of psychotherapy, leaving open the possibility of comprehensive psychosocial treatment.

The productivity of the workforce suffers, as does the pay and earnings of those who are afflicted with alcoholism. Sickness, hangovers, tardiness, mistakes, unfinished work, losses, and having coworkers who arrive early in the morning are all possibilities for employees who operate in an alcohol-friendly environment.

When a loved one is an alcoholic, they may find themselves in a situation where they are unable to meet their basic needs, such as paying for food and clothing, neglecting bills, or increasing their expenses, such as medical fees and fines. Loss of housing, increased debt, and a lower level of living are all possible outcomes. A person's overall financial well-being and stability, as well as the financial well-being and stability of their entire family, including any children, can be negatively impacted by secondary alcohol abuse.

Methods

The researchers in this study set out to find out how a family-centered approach to treatment affected alcoholics' loved ones' ability to cope. The research was done at the Selected Addiction Center, Indore. quasi-experimental research methodology (pre-test and post test design). It took ten days to gather all of the information. The study's objectives guided the selection of the study's sample. A total of 200 samples were used in the investigation. The effectiveness of the coping strategies was evaluated using the Lazarus Coping Scale. The study included a substantial number of persons who scored below 80. After 10 days of family-centered intervention, the subject's ability to cope was assessed.

RESULTS

Family members' ages range from 25 to 35 for 47 percent, 15 to 24 for 31 percent, 35 to 45 for 18 percent, and 45 and up for 10.11 percent, according to the research. 70 percent of the responders were male, whereas just 50 percent were female, according to this survey. All of the participants in this study had completed high school. Fewer than a third of the samples (39 percent) were housewives and more than two-thirds (77 percent) had an annual salary of Rs 3000 to 5000. More over 90% of those who took part in this study were married, with only 34% of them being single. 76 percent of those who took the poll were members of monogamous households, while 18 percent were members of polygamous households. Only 8.9 percent of respondents in this poll did not

have children, according to the findings. Among the 200 participants in this study, 56 percent had difficulties for five to ten years, 83 percent had difficulty for ten years, and 45 percent had difficulty for less than five years.

Families of alcoholics are affected by problem-oriented coping, according to family-focused interventions. The family members' pre-test score was 28.12, and their post-test score was 40.1, when they used problem-oriented coping. Pre-test standard deviation was 7.71, post-test standard deviation was 5.23. The difference was significant. On average, there was a 5.44-point gap between the two groups. This indicates that the coping behaviour of alcoholics' families has greatly risen.

Family-focused intervention on coping among alcoholics' families was found to be helpful, but not limited to, findings of the affective-oriented strategy. Before completing the test, the average score of family members who used an affective-oriented method to deal with their emotions was 51.56; after taking the test, the average score of these family members was 49.67. The pre-test standard deviation was 5.43, and in the post-test, it was 2.66. According to the results, the difference between the average and the mean is 2.95. This indicates that the coping behaviour of alcoholics' families has greatly risen.

After a family-focused intervention in coping strategies, those who had family members with alcoholism exhibited significant changes in their post-test scores. Family members' average scores were 65.12 before the test, and they were 71.08 after the test, according to the results. The pre-test standard deviation was 5.12, and the post-test standard deviation was 2.54 based on the data. A 7.82 standard deviation was found between the mean and the standard deviation. When it comes to helping the families of alcoholics function better, family-focused intervention had an exceptional success rate.

DISCUSSION

At the one-year follow-up, we found that everyone's coping methods, hardship, and psychiatric symptoms had improved, regardless of whether they had received any support. Using therapies that lasted for a longer amount of time resulted in a greater reduction in mental symptoms (coping skills training and group support). However, a number of studies have shown that short-term intervention can have a positive impact on coping mechanisms.

Family-focused intervention on coping among alcoholics' families was found to be helpful, but not limited to, findings of the affective-oriented strategy. It was shown that family members who used an affective-oriented method of coping prior to taking the exam had an average score of 43, and that following the test, they had an average score of 47. Pre-test standard deviation was 5.11, and post-test standard deviation was 4.12, a decrease of 5.9 percent. In this case, 4,13 was the difference between the mean and the average. There was a significant increase in the ability of family members of alcoholics to cope over this time period. In a research by Miller and colleagues, participants in three independent intervention programmes for family members reported significant reductions in depression, rage and family conflict as well as gains in family cohesion and relationship happiness. – (1999).

After a family-focused intervention in coping strategies, those who had family members with alcoholism exhibited significant changes in their post-test scores. The average scores of family members before and after the test were 62.12 and 54.81, respectively. Standard deviation was 5.23 before the test and 2.77 after the test, the results showed. Mean and standard deviation were 5.12 points apart in this experiment. It appears to have had a significant impact on the coping abilities of family members of alcoholics who received family-focused intervention. Research demonstrates that intervention in spouses can result in a shift in the relative's problem alcohol use, which can improve family connections. Drinkers in the programme had already cut back on their drinking before the relative enrolled.

in order to discover the effects of family-oriented intervention on the coping methods of relatives of alcoholics, this study was done An increase in the mean coping score and percentage from 51 to 88 was shown to be significant. A better ability to deal with stress was gained as a result of the intervention.

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