

The Effectivity of Resiliency Training (Program) on Self-Acceptance and “Self-Autonomy” of “Self-Referent” Female Addicts Referring to Drug Treatment Centers

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Abstract

Objective: This study aims to investigate the effectiveness of resiliency training (program) on the goal-oriented and autonomous life of self-referent female addicts referring to the drug treatment centers in Yazd city. **Methodology:** This study was a quasi-experimental study. The statistical population of this research is composed of all of the self-referent females referring to the drug treatment centers of Yazd city with an annual population of about 4000. Henderson and Milstein’s resiliency training package was used for resiliency training. Data were analyzed using descriptive statistics and multivariate analysis of covariance. **Findings:** The results of this study show that resiliency training (program) has a positive effect on autonomy and purposeful life where its effect on purposeful life and autonomy is 0.90 and 0.76, respectively. **Conclusion:** Given the above results suggesting the effect of resiliency training on the purposeful life and autonomy of female addicts, we could improve autonomy and purposeful life in them.

Keywords: resiliency, purposeful life, autonomy, self-referent, drug treatment center

INTRODUCTION

The physical and mental health of women is of great significance due to their improving role in family rearing and parenting. Therefore, the issue of female addiction has always been one of the most key issues in all societies. The effects of addiction are very severe in family and society, but the impact of these injuries will be multiplied by women or mothers become addicted. Unfortunately, in our country, the rate of women’s addiction is rising. The population of addicted women in the country in 2008 was estimated by Drug Control Headquarters to be about 114,000 people representing between 6 to 8 percent of the population. However, according to the latest report of the Ministry of Interior and the Drug Control Headquarters in the year 2017, there were a total of 1,325,000 addicts in the country and if this population is considered with household dimension, about 6 million Iranians are directly affected by drug addiction. Among this, women amount to 10 percent of the population of addicts [1]. The extensive body of literature shows that drug use in women, especially by injecting, is associated with other societal harms such as home escape and prostitution. In addition, it has been found that addicted females have more mental problems than other females. Thus, it is necessary to approach the mental problems of addicted females for reason like their vulnerability to social unorthodoxies and gender characteristics [2].

In recent years, the positivist psychology approach has received considerable scholarly attention with a focus on human talent and capabilities rather than dealing with

abnormalities and disorders. The ultimate goal of this approach is to recognize topics and practices that lead to human well-being and happiness. Therefore, the factors that make human beings more adaptable to life needs and threats, are the fundamental subject of this attitude. Among these, resiliency has a specific position in the areas of evolutionary psychology, family psychology, and mental health with increasing pieces of research pursued on this subject everyday Campbell, Sills [3]. By the early 1980s, many psychologists believed that stressful events play a crucial role in developing psychiatric disorders. For instance, Holmes and Rahe found that life events are closely linked to the onset of disease. Notwithstanding, the studies conducted by subsequent researchers indicated that there are moderating factors, among stressful events and mental disorders, that cause them to have different effects on people. One of these features is resiliency [4]. Furthermore, scholars maintain that

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resiliency is a kind of self-healing with positive emotional, affective, and cognitive consequences. Samani et al (2015) argued that resiliency is a return to initial equilibrium or reaching a high-level equilibrium under threatening conditions, and so providing successful adaptability in life^[5]. Yet, they points out that positive adaptability to life can both be considered as the outcome of resiliency and as cause a higher level of resiliency as the precursor. He attributes this issue to the complexity of definition and a procedural attitude to resiliency^[5]. Also, resiliency has multifaceted nature, so an individual may be resilient in one area but not in other areas^[6]. According to Bandura, resilient people behave using four cognitive, emotional, motivational, and selective processes. These people view challenges as an opportunity for growth (cognitive), with minimal stress (emotional), with a maximum drive (motivational), and with a view to reorganizing life (selective). Therefore, resilient people are dynamic and flexible in facing life situations. Resiliency is a studied concept by researchers from various disciplines such as psychology, sociology, and biology that has been explained in various ways such as positive adaptability to the environment despite perilous situations. Resiliency is used to refer to the process of adapting well when faced with difficulties, disasters, threats, or important sources of stress such as family or issues related to that, serious health problems, financial stressors and workplace. In their study on resiliency, Malkouk & Yalcin underscored three key aspects, namely resiliency as a capacity, a process, and a result. In all of these aspects, the structure of resiliency is regarded as an important construct of development for adolescents^[7].

The ability to find meaning and orientation in life and having purpose and pursuing them, are central aspects of well-being which are in opposition to happiness. The first and most clear theory regarding goal-orientedness in life has been presented by Rodriguez et al (2018). Rodriguez et al (2018) spent three difficult years in Nazi camp and survived with his goals during those years. His attitude towards promoting a higher standard of living, goals, and meaning were so profound that, in the years following his release, he could find a way of psychotherapy (meaning therapy) to help his fellow men in finding meaning in life. Using this approach, individuals could endure and resist hardship and suffering^[8]. Life orientation is used to refer to the way people look at when faced with life events including two aspects of optimism and pessimism, and has an impact on how people adapt to life events, mental expectations of individuals when faced with difficulties, and also their behavior when overcoming problems. According to the model by Scheier and Carver (1985), optimism and pessimism are defined as pervasive positive and negative expectations. According to this model, expecting pervasive results has a significant relationship with the psychological adaptability of adolescents and older people. If normal perceptions of human beings are combined with a positive sense of the self, personal control, and an optimistic attitude towards the future which may be even false, it would help people not only manage their daily lives but also deal with stressful and life-threatening events.

Generally speaking, these people who are confident about the future continue to strive even when faced with serious tribulations. In contrast, those who are hesitant try to distance themselves from these adversities. Exhaustive research has shown that optimism and pessimism are closely linked with a wide range of structures related to mental health such as self-esteem, desperateness, and neuroticism. Optimists are more outgoing than pessimists, exercise more, enjoy more favorable interpersonal skills, and can easily create supportive social networks around them^[9].

Autonomy means that one can act and live based on his/her own standards and beliefs, even if it is contrary to accepted beliefs and practices in society. A fully-grown and self-sufficient human being is free from any social contract and tradition. It would appear that this aspect of well-being fully captures the concept of Western virtue in which the individual is completely isolated to achieve autonomy and to select lifestyle based on his/her own personal and inner desires and views and even accepts some disgraces. Thus, the individual that chooses such a way of life, has the ability to live alone. Such a lifestyle requires both courage and solitude. Ferasatkish et al. (2016), based on Hyder’s concept of “perceived inhibitory pathway” that distinguishes between individual causality (that is, intrinsically motivated behaviors) and non-individual causality (actions based on environmental factors), believe that feeling autonomy is one of the essentials of mental health^[10]. In Ferasatkish et al. (2016) theory, the burning issue is the principle of internalization through which individuals transform external causes that direct actions to internal causes. Two general dimensions in this internalization are autonomy and containment which are described in a continuum entitled “regulatory styles”. At the beginning of this continuum, there is an external regulatory style in which extrinsic motivation such as reward, punishment, and encouragement are the trigger of behavior. Next, we have an interjection regulatory style. In this kind of regulation, although the reasons are internal, the pressure of internal factors forces the individual to act through self-perceived threat, anxiety, and guilt. The fourth stage in the autonomy continuum is the simulated regulation style where extrinsic motivations have been internalized in the value system of the individual. In other words, the individual does things that are personally important to him/her. The fourth regulatory style is the integrated regulation style. This kind of regulation is not seen in children and describes flexible relationships between multiple goals in different behaviors. Finally, there is the internalized regulation style in which the individual behaves, no matter the outcome, merely for the sake of excitement, pleasure, and inner desire. On the basis of theory of autonomy, when the individual performs actions based on intrinsic reasons (internalized regulation style and simulation), s/he is more satisfied with life, feels less frustrated, and ultimately is more adaptable and when the individual behaves on the basis of external reasons, s/he will have less satisfaction and experience more frustration^[11].

In a study entitled *Explaining Psychological Well-Being Based on Positive Psychological Components of Psychological Growth*, Rashidzadeh *et al.* (2018) showed that the components of self-efficacy, optimism, hope, purposefulness in life, and psychological flourishing have positive and significant relationship with psychological well-being, and the components of hope, self-efficacy, purposefulness in life, and flourishing could directly predict the psychological well-being of students [12]. The analysis of data by Danesh *et al.* (2016) suggested that among dimensions of psychological well-being, there is a significant difference between two patient and normal groups only in the two dimensions of acceptance and individual growth [13]. In resiliency, there was also a significant difference between the two patients and normal groups. According to the findings of Ebrahimi Mimand and Fathi Agdam (2016), self-efficacy and resiliency predict psychological well-being among students [14]. There is a positive and significant relationship between resiliency and the psychological well-being of students and there is a positive and significant correlation between resiliency and the dimensions of psychological well-being such as self-acceptance and personal growth. However, there is no significant relationship between resiliency and the dimensions of psychological well-being including positive interaction with others, autonomy, purposeful life, and the mastery of the environment and there is a positive and significant correlation between self-efficacy and the dimensions of psychological well-being such as positive interaction with others. However, there is no significant relationship between self-efficacy and the dimensions of psychological well-being including self-acceptance, positive relation with others, autonomy, purposeful life, personal growth, and the mastery of the environment. The analysis of the relationship between resiliency, well-being, and coping strategies in Italian students has high positive attitudes, positive correlation with reinterpretation and problem-solving strategies, and a negative correlation with preventive coping strategies. High positive attitudes have a positive relationship with all of the dimensions of psychological wellbeing. According to findings between resiliency and well-being in middle-aged and late adolescent Italian students, most teens have the ability to choose the right areas for their personal needs, personal growth, and developing their perceptions of personal satisfaction [15]. Sharifi, K., & Saidi (2015) indicated that individuals with a high sense of well-being, experience positive emotions and make positive evaluations of events around them [16]. However, individuals with a low sense of well-being tend to evaluate their life events as unfavorable and mostly experience negative emotions like stress, depression, and anger.

MATERIALS AND METHODS

This study is a quasi-experimental and applied research of pre-test and post-test type. This project compares two similar groups. Each group is tested twice. The experimental group is tested before and after the test and the control group is tested at the same time as the experimental group but without

any intervention. The statistical population of this research is composed of self-referring addicted women referring to drug treatment centers in Yazd city whose annual statistics were estimated to be about 4000. It should be noted that the statistics of addicted women are approximate and no exact data are available. Sample: in this study, 15 self-referring women referring to females' drug treatment camps were tested as experimental group and 15 self-referring women referring to drug treatment centers were tested as a control group. The sampling technique of this study was a convenience sampling method where samples were selected from several clinics in Yazd city and among whom questionnaires were distributed.

Ryff's RSPWB questionnaire was used. This questionnaire was developed in 1980 by Ryff and has 120 items and in the subsequent analyses, questionnaires with 18, 54, and 84 questions were also proposed that measure psychological well-being using a six-point Likert scale (strongly agree to strongly disagree). In this study, the 84-question version with six subscales was used. In this questionnaire, all questions are rated directly. After obtaining necessary permissions and letters from relevant authorities and coordinating with relevant centers, the questionnaires were initially distributed among two groups of self-referring women referring to drug treatment centers and they were assured of the confidentiality of information. Necessary explanations were given to answer the questions. After receiving the answers, one group was tested over nine sessions of 90 minutes length. The number of sessions was scheduled for month and resiliency was taught to them. This questionnaire is a self-report and closed-ended one. Psychological well-being is a multi-dimensional concept including self-acceptance, positive relations with others, autonomy, mastery of the environment, purposeful life, and personal growth. The subjects are asked to read the questions and determine their judgment about themselves on one of the choices of strongly disagree, somewhat disagree, slightly disagree, slightly agree, somewhat agree, strongly agree. A higher score indicates better psychological well-being. In quantitative research, the measurement tool is of real significance because when there is a lack of accuracy in the measurement tool, all the results obtained will be invalid. The validity and reliability of Ryff's questionnaire have been reported to be acceptable in various researches. The coefficient of similarity in the original version of the subscales of this questionnaire was reported as follows: autonomy = 0.76 and purposeful life = 0.90. The reliability of this questionnaire by the subscale retesting method in a sample of 117 individuals ranged from 0.81 to 0.85 within six weeks. The reliability coefficient using scale retesting method, evaluated Ryff's psychological well-being to be 0.82, and self-acceptance subscales, positive relation with others, autonomy, mastery of the environment, purposeful life, and personal growth to be 0.77, 0.71, 0.78, 0.77, 0.70, and 0.78, respectively.

Table 1. The description of resiliency training sessions

Session	Topic	Training method	Time
1	Getting to know the audience, communicating, familiarizing them with resiliency, and the rules of participating in the workshop	Lecture, question and answer, group discussion	90 min
2	Self-awareness aimed at the awareness of one’s abilities	Lecture, question and	90 min
3	Being valuable aimed at enhancing self-esteem	Lecture, question and	90 min
4	Effective relation, enhancing the individual’s ability to communicate	Lecture, question and	90 min
5	Interaction with the aim of establishing social relations and making friends, self-efficacy in accountability	Lecture, question and answer, group discussion	90 min
6	Futurism and defining the purpose and how to achieve it	Lecture, question and	90 min
7	Self-efficacy with the aim of making the right decisions in life, self-efficacy in solving problems	Lecture, question and answer, group discussion	90 min
8	Emotional control with the aim of anger management, anxiety, and stress management	Lecture, question and answer, group discussion	90 min
9	Meaningfulness with the aim of strengthening the sense of spirituality and faith	Lecture, question and answer, group discussion	90 min

FINDINGS

To analyze data gained from questionnaires, the information was first transferred to a computer using SPSS software and then, the data analysis was conducted. In the first section, data were organized using descriptive statistics including mean and standard deviation, covariance analysis was used for inferential statistics, and Cronbach’s alpha coefficient was used for reliability analysis. The table of descriptive statistics indicators (mean and standard deviation) of the subjects’ scores as separated by groups are as follows.

Table 2. mean and standard deviation of the scores of psychological wellbeing for the subjects of two groups

Group	Stage variable	Control group (J = 15)		Experimental group (J = 15)	
		Mean	Standard deviation	Mean	Standard deviation
Autonomy	Pre-test	48.43	8.40	47.20	6.79
	Post-test	49.43	5.97	57.87	8.86
Purposeful life	Pre-test	46	8.07	47.67	11.86
	Post-test	47.57	4.79	56.33	5.88

Resiliency training sessions continued to be held for one month consisting of nine sessions of 90 minutes in length, roughly two sessions per week. Two months after the pre-test, the questionnaire was again distributed among two experimental and control groups, and after answering the questions, the questionnaires were collected. Scoring choices and classifying questions according to items, the scores of each item were obtained, choices were entered into the software, and results were analyzed after necessary calculations.

The results related to the first sub-hypothesis

The first sub-hypothesis stated that resiliency training (program) has an effect on the purposeful life of self-referring addicts referring to drug treatment centers. Univariate analysis of covariance was used to test this hypothesis. In this analysis, we entered into the model the group (experimental and control groups) as an inter-subject factor, the scores of a purposeful life in pre-test as a control variable, and the scores of a purposeful life in post-test as a dependent variable. The results of this analysis are presented in Table 3.

Table 3. the results of univariate covariance analysis related to the scores of a purposeful life

Source of changes	Sum of squares	Degree of freedom	Mean of squares	B value	Significance level	Degree of effect
Pre-test	19.68	1	19.68	0.66	0.42	0.02
Group	589.22	1	589.22	20.03	0.001	0.42
Error	794.04	27	29.40			
Total	81833	30				

The results of univariate covariance analysis in Table 3 indicate that the effect of the scores of the pre-test was not significant ($s = 0.42$, $b = 0.66$). That is, there was no difference between the pre-test scores of purposeful life among two groups and both groups had the same condition in the pre-test. Furthermore, the results presented in the above table indicate that after controlling pre-test scores, the effect of group on the post-test scores of a purposeful life is significant ($s = 0.001$, $b = 20.03$). Put it differently, there is a significant difference between the subjects of two experimental and control groups in the mean score of a purposeful life in the post-test phase. Given the descriptive indicators in Table 1, these differences are such that the post-test scores of purposeful life for the subjects of the experimental group (56.33) are significantly higher than the scores of the subjects of the control group (47.57). Otherwise stated, these results suggest the confirmation of the first sub-hypothesis of research and resiliency training (program) influences the purposeful life of self-referring addicts referring to drug treatment centers.

The results related to the second sub-hypothesis

The second sub-hypothesis stated that resiliency training (program) has an effect on the autonomy of self-referring

addicts referring to drug treatment centers. Univariate covariance analysis was used to test this hypothesis. In this analysis, we entered into the model the group (experimental and control groups) as an inter-subject factor, the scores of autonomy in pre-test as a control variable, and the scores of autonomy in the post-test as a dependent variable. The results of this analysis are presented in Table 4.

Table 4. the results of univariate covariance analysis related to the scores of autonomy

Source of changes	Sum of squares	Degree of freedom	Mean of squares	B value	Significance level	Degree of effect
Pre-test	49.91	1	49.91	0.86	0.36	0.03
Group	499.42	1	499.42	8.60	0.007	0.24
Error	1566.49	27	58.02			
Total	89245	30				

The results of univariate covariance analysis in Table 4 shows that the effect of pre-test scores was not significant ($s = 0.36$, $b = 0.86$). This indicates that there was no difference between the pre-test scores of autonomy between two groups and both groups had similar conditions in the pre-test. Also, the results in the table above demonstrate that after controlling pre-test scores, the effect of the group on the post-test scores of autonomy is significant ($s = 0.007$, $b = 8.60$). In other words, there is a significant difference between the subjects of both experimental and control groups in the mean score of autonomy in the post-test phase. Given the descriptive indicators in Table 1, these differences are such that the post-test scores of autonomy for the subjects of the experimental group (57.87) are significantly higher than the scores of the subjects of the control group (49.43). Otherwise stated, these results suggest the confirmation of the second sub-hypothesis of research and resiliency training (program) influences the purposeful life of self-referring addicts referring to drug treatment centers.

DISCUSSION AND CONCLUSION

Mental health includes knowing that an individual has a greater purpose in life. Having a purpose in life directs the individual, thereby reducing sadness and exerting effort to succeed. When people focus their attention on this, they adopt realistic goals and strive to achieve their goals step by step. The goals must be clear, definite, and measurable; barriers to achieving the goal must be determined to the extent possible; knowledge, information, and the skills to achieve the goal must be acquired, and ultimately, the goal must be commensurate with individual’s ability. Most people do not properly understand the difference between purpose and ambition and conceive of goals beyond their ability. When they do not see the ability to achieve it or do not attain it after much effort, they become frustrated, give up, and believe in a force beyond their effort, determination, and willpower that they lack to achieve the goal. Therefore, identifying and training a realistic definition of a goal is very beneficial for

individuals. A drug addict has lost his/her resolve because of drug dependence and has left it in the hands of the drug. They do not see in themselves any resolution to act on their own will. Thus, they attribute whatever happens to them to external factors and make their role in their lives minor or less meaningful. By teaching this component, the addicted person knows that anyone can and should be able to greatly control his/her environment and to change their environment according to their resolve and desire. In the end, we would like to offer our sincere thanks to all those who were somehow involved in the preparation of this article.

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