



Original Article

Parent-Child Relationship, Demographic Attributes and Self-Defeating Behaviour Patterns among Individuals with Substance Use Disorder

Talala Usman¹, Asia², Fizza Haq³ and Sheraz Ahmad³

¹Riphah Institute of Clinical and Professional Psychology, Riphah International University, Lahore, Pakistan

²Faculty of Rehabilitation and Allied Health Sciences, Riphah International University, Lahore, Pakistan

³University of Management and Technology, Lahore, Pakistan

ARTICLE INFO

Key Words:

Parent-Child Relationship, Locus of Control, Self-Defeating Behaviour

How to Cite:

Usman, T. ., Asia, ., Haq, F. ., & Ahmad, S. . (2023). Parent-Child Relationship, Demographic Attributes and Self-Defeating Behaviour Patterns among Individuals with Substance Use Disorder : Parent-Child Relationship and Substance Use Disorder. *Pakistan Journal of Health Sciences*, 4(03). <https://doi.org/10.54393/pjhs.v4i03.579>

***Corresponding Author:**

Talala Usman

Riphah Institute of Clinical and Professional Psychology, Riphah International University, Lahore, Pakistan

talalausman@gmail.com

Received Date: 11th February, 2023

Acceptance Date: 25th March, 2023

Published Date: 31st March, 2023

ABSTRACT

The human needs belong to the universal, fundamental, and influential needs and its effects on mental health if people get social rejection and exclusion. The maladaptive patterns were developed, and it could continue till adulthood. **Objective:** To look at the relationship and prediction of Parent-Child and self-defeating behaviour in individuals with substance use disorder. **Methods:** It was correlational research in which purposive sampling was used to collect data of 150 participants with substance use disorder from Hospital and Rehabilitation Centres. Pearson product moment correlation analysis, linear regression analysis was used to find correlation and predication respectively, while 5% (0.05). p-value was used for the study to analysis significance of the variables. The inventory of parents and peer attachment, and Ottawa self-injury inventory were individually administered to measure parent-child relationship, and self-defeating behaviour respectively. **Results:** Parent-child relationship was negative significant with Self-defeating behaviour ($r=-0.182, p\leq.05$), family member ($r= -0.33, p\leq0.005$) and with life satisfaction ($r= -0.27, p\leq0.001$), while self-defeating behaviour was positively significant with age ($r= 0.29, p\leq0.005$), family status ($r=0.19, p\leq0.05$) and duration with drug use ($r= 0.17, p\leq0.05$). Negatively significant with education ($r= -0.19, p\leq0.05$), marital status ($r= -0.28, p\leq0.005$) and life satisfaction ($r= -0.27, p\leq0.005$). The result showed that 11% of the variance explained by demographic variable in self-defeating behaviour of participants. **Conclusions:** It was concluded that negative relationship found between parent-child relationship and self-defeating behaviour. Parent-Child relationship is significant predictor of self-defeating behaviour with demographic variables.

INTRODUCTION

The human needs belong to the universal, fundamental, and influential needs and its effects on mental health if people get social rejection and exclusion [1]. The maladaptive patterns were developed or related to the early experiences relation with parents and other people (peer), and it could continue till adulthood [2]. Self-defeating behaviour was noticeable issue in clinical and social setting and explained as self-imposing like purposefully do injuries and harming [3]. Self-defeating self-destructive conduct, maladaptive behaviour, and/or risk-behaviours are terms used to describe a range of activities that commonly produce bad outcomes and pose a harm to an individual's physical and mental well-being [4-8]. People involved into

self-defeating pattern due to getting rejection and inconsistent in their relationship with parents and their parents fail to provide love and attention about their needs [9]. The parent-child relationship is a unique procedure for feelings, behaviours, and expectation. During the course of the lifespan, the people have many relationships, but the parent-child relationship is special. To apprehend the parent-child relationship gives the impression of certain aspects like physically, emotionally, and socially [10]. There are distinct kinds of relationships that can be put into caregiver in separate categories i.e., secure relationship (child dependent on their parents about their needs, beliefs and want their parents in every situation), avoidance

relationship (parents' response to the child wishes), ambivalent relationship (child feel insecure connection with their parents) and disorganized relationship (give a secure environment for child). The way a child (adult) is connected to their parents shows how they will behave around others when their parents are not near to them [11-13]. Substance use is usually defined as a pattern to altering mood and for harm to self. In "Substance" many different forms are including like alcohol and other drugs which are legal or illegal and some substances are not drugs at all [14]. Substance use is defined as a psychoactive substance which uses a harmful and dangerous product such as alcohol and illicit drugs. According to DSM-5 substance-related disorder is recognized as in 10 classes of drugs [15]. Alcohol, cannabis, inhalants, hallucinogens (phencyclidine and other hallucinogens, such as LSD), opioids, hypnotics, sedatives, stimulants (including amphetamine-type drugs, cocaine, and other stimulants), cigarettes, and other unidentified chemicals have all been used [16]. The previous research looked at the link between parent-daughter relationships, psychological functioning, and self-defeating Behaviour in female adolescents. The findings revealed that the parent-daughter relationship was indirectly linked to self-defeating behaviours (i.e., deliberate self-harm/suicidal ideation, multiple sexual partners, and substance abuse) and that psychological factors played a role as a mediator between these variables (parent-daughter and self-defeating behaviour) (i.e., low self-esteem and internalising symptoms) [17]. Furthermore, a previous study conducted at Midwestern University to test the conceptual model of working through self-defeating style to investigate the various concepts of self-defeating behaviour patterns revealed that attachment and distress were mediators between self-defeating behaviour patterns and depression, as well as some other variables such as self-esteem, social self-efficacy. The current study was designed to investigate the relationship between parent-child, self-defeating behaviour patterns and its demographic correlation in clinical population (substance use patients), and find out the prediction between parent-child relationship and self-defeating behaviour in clinical population (substance use disorder).

METHODS

It was correlational research in which purposive sampling was used in this study. Pearson product moment correlation analysis, linear regression analysis was used to find correlation and predication respectively, while 5% (0.05) p-value is used for the study to analysis significance of the variables. The sample size was 150 participants determined through G-power analysis. The sample was

collected from different Hospitals and Clinic of Lahore. The including Punjab Institute of Mental Health (PIMH) (n= 16), Services Hospital (n=2), Willing Ways Clinic (n=10), Blessing the Mental Health Clinic (n=27), Fountain House (n=17), Inspire Recovery Clinic (n= 19), Mayo Hospital (n=49), Ehsaas Clinic (n=6), and Jinnah Hospital (n=4). After the permission from the authorities of respective hospitals and clinic, data was collected from outdoor and indoor patients. The demographic information sheet included the information related to the individual with substance abuse and its divided into general information such as age, education, number of siblings, birth order, marital status, number of children, occupational, number of family member, family income, Participant income, satisfied with life and other related to the information about drugs or substance use such as type of drug, duration of drug use, amount of drugs use, reason to use drug, feeling while using drugs, etc. The Inventory of Parent and Peer Attachment (IPPA) is a self-report measure of parent-adolescent relationship quality, and it has twenty-eight items of both mother and father [18]. The ratings were computed on three subscales for each relationship (mother and father) such as trust, communication and alienation. There is reverse scoring of trust and communication items i.e., 3, 5, 7, 10, 15. The 5-Likert scale is used i.e., 1= almost always/always true till 5= almost never/never true). The Ottawa self-injury instrument scale, established by Cloutier et al., is a self-report inventory [19] that looks at self-harm in terms of occurrence, frequency, self-harming functions, and dependence on a psychoactive substance. The solution was determined by selecting from a range of possibilities ranging from 0 to 4 (daily or always). The self-injury function subscale has 31 items, whereas the reliance on psychoactive substance subscale has seven. After taken permission from the author the scale was translated into the Urdu language using MAPI guidelines. The scale was translated into Urdu using MAPI criteria, which are an internationally established translation approach. To convert the original instrument into the target language, the linguistic validation procedure was used. The scale was translated into a format that was conceptually equivalent to the original and easily understood by those who received the translated questionnaire. The scale was translated in both directions, forward and backward. Data were entered and analysed by SPSS version-25.0. Pearson product moment correlation analysis between was carried out among study variables and demographic characteristic of participants. p-value <0.05 was considered as significant.

RESULTS

Present research was carried out to find out the relationship between parent-child, self-defeating

behaviour patterns and its demographic correlation in Clinical Population (substance use patients). The first finding revealed the psychometric qualities of the evaluation tools employed in this study i.e. The questionnaire's Cronbach's Alpha coefficient. The demographics of the participants were reported in the second. Finally, Pearson Product correlation studies were provided, which looked at the relationship between parent-child, self-defeating behaviour patterns, and demographic correlation in the clinical population (substance use patients). In the last, regression analysis was presented that show predictors of demographic variables. The results shown in Table 1 indicate that the Cronbach's alpha reliability of the parent and peer inventory, and Ottawa self-injury inventory (self-defeating behaviour) is high, while the internal reliabilities of all subscales are acceptable.

Table 1: Cronbach's alpha reliability of the Parent, Peer Inventory, and Ottawa Self-Injury Inventory

Variables	k	Mean ± SD	Potential		Actual		α
			Min Scores	Max Scores	Min Scores	Max Scores	
Parent and Peer Attachment	50	167.4 ± 18.7	1	5	50	250	0.79
Attachment with Mother	25	84.9 ± 9.9	1	5	25	125	0.67
Attachment with Father	25	82.4 ± 10.8	1	5	25	125	0.66
Self-Injury	67	191.8 ± 34	0	4	0	268	0.79
Functions	25	40.9 ± 20.2	0	4	0	100	0.92
Addictive	7	13.16 ± 6.1	0	4	0	28	0.78

k= Number of Items, M= Mean, SD= Standard Deviation, α= Cronbach's alpha

Table 2 revealed that the demographics of the participants. The mean ± standard deviation age of participants was 28.4 ± 7.2 and mean ± standard deviation of Education was 8.2 ± 4.4). The duration of drugs use by participants was 6.1 ± 4.3 with the number of drugs 4.4 gram ± 12.2. Mostly participants were unmarried (90%) and lived in the nuclear family system (101%). Mostly participants requested help from their family members (82%) and Satisfied from their life(71%).

Table 2: Showing Demographic Characteristics of Participants (N=150)

Variables	Mean ± SD, F(%)
Age (15-55)	28.4 ± 7.2
Level of Education (0-14)	8.2 ± 4.4
Duration of Drug uses (1-20)	6.1 ± 4.3
Amount of drugs use (1-20gm)	4.4 ± 12.2
Family System	
Nuclear	101(67.3)
Joint	49(32.7)
Marital Status	
Married	60(40.0)
Unmarried	90(60.0)

Drug use by other Family Member	
Yes	39(26.0)
No	111(74.0)
Attempt to Withdraw Drugs	
Yes	109(72.7)
No	41(27.3)
Success in Attempt Withdraw	
Greatly	83(55.3)
Not at all	67(44.7)
Life Satisfaction	
Not satisfied	26(17.3)
Satisfied	71(47.3)
Too much satisfied	53(35.3)

The results in Table 3 reveal that the Parent's Cronbach's alpha reliability of the Parent and Peer Inventory α= 0.79 and Ottawa self-injury inventory (self-defeating behaviour) α= 0.79, while the reliability of subscale of The Inventory of parent-peer attachment is moderate attachment with mother α=0.67 and attachment with father α= 0.66. Pearson product moment correlation was used to discover the relationships between study variables. Other study factors and subscales were also investigated for correlation.

Table 3: Pearson product moment correlation analysis between study variables and demographic characteristic of participants (N=150)

Parameters	1	2	3	4	5	6	7	8	9	10	Mean ± SD
PCR	1	-.18*	-.14	.05	.04	.01	-.32**	-.00	-.09	.38**	167.40 ± 18.78
DSB		1	.28**	-.19*	.18*	-.27**	.11	.16*	.11	-.27**	191.87 ± 34.04
Age			1	-.21**	.15	-.55**	-.06	.27**	.07	.00	28.45 ± 34.04
Ed				1	.00	.21**	-.08	-.20*	.12	.06	8.15 ± 4.41
Fs					1	-.27**	.02	.15	.05	-.03	1.33 ± 0.471
Ms						1	.14	-.16*	-.04	-.04	1.60 ± 0.492
Rfh							1	-.04	-.04	-.27**	1.45 ± 0.499
Ddu								1	.09	.04	6.06 ± 4.30
Adu									1	.011	4.44 ± 12.12
LS										1	2.18 ± 0.705

p<0.05*, p<0.005**, p<0.001*** PCR= Parent-Child Relationship, SDB= Self-Defeating Behaviour, age, ED= Education, Fs=Family System (1= Nuclear, 2= joint), Ms= Martial status (1= married, 2 unmarried), Rfh = Request for help (1= family member, 2= friends), Ddu= Duration of Drug use, Adu= Amount of drug use, LS= Life Satisfaction (1= not satisfied, 2= satisfied, 3= to much satisfied)

Results revealed that parent-child relationship had negative significant with self-defeating behaviour (r= -0.182, p ≤0.05), parent-child relationship negative significant with request for help toward family member (r= -0.33, p ≤0.005) and parent-child relationship had negatively significant with life satisfaction (r= -0.27, p ≤0.001), while self-defeating behaviour positively significant with age (r= 0.29, p ≤0.005), family status

($r=0.19$, $p \leq 0.05$) and duration with drug use ($r= 0.17$, $p \leq 0.05$), and negatively significant with education ($r= -0.19$, $p \leq 0.05$), marital status ($r= -0.28$, $p \leq 0.005$) and life satisfaction ($r= -0.27$, $p \leq 0.005$). Table 4 reveals the results of regression analysis; the first model shows the predicating self-defeating behaviour by parent-child relationship. The result indicated that self-defeating behaviour was significantly predicted parent-child relationship, $F(1, 150) = 0.3$, $p \leq 0.05$ and $R^2 = 0.03$. The results show 3% of the variance predictor of self-defeating behaviour with parent-child relationship. The second model shows the predication of self-defeating behaviour by parent-child relationship and demographic variable. The result indicated that self-defeating behaviour was significant predictor of parent-child relationship and marital status, $F(1, 150) = 0.8$, $p \leq 0.001$ and $R^2 = 0.11$. The result shows that 11% of the variance explained by demographic variable in Self-defeating behaviour of participant. The third model shows the prediction self-defeating behaviour by parent-child relationship and demographic variable. The result indicated that self-defeating behaviour was significant predictor of parent-child relationship by marital status and life satisfaction, $F(1, 105) = 0.5$, $p \geq 0.001$ and $R^2 = 0.16$. The result shows that 16% of the variance predictor of self-defeating behaviour with parent-child relationship, marital status and life satisfaction.

Table 4: Hierarchical multiple regression analysis showing predication of self-defeating behaviour by parent-child relationship and demographic variables

Predictors	Self-Defeating Behavior	
	ΔR^2	β
Model/Step 1	0.03*	
PCR		-0.33*
Model/Step 2	.08***	
PCR		-0.33*
Marital Status		-18.9***
Model/Step 3	.055	
PCR		-0.15
Marital Status		-19.7***
Life Satisfaction		-12.3
R^2	16%	
N	150	

$p \leq 0.05^*$, $p \leq 0.005^{**}$, $p \leq 0.001^{***}$ B = Unstandardized Coefficient; ΔR^2 = Change R Square, R^2 = R Square, B = Beta

DISCUSSION

The current study has focused on the relationship of parent-child relationship and self-defeating behaviour patterns and how these factors affect self-defeating behaviour patterns in substance users in the Pakistani community. The findings of current study have been discussed in light of previous literature. Result of the present study also found that parent-child Relationship has

negative relationship with self-defeating behaviour i.e., substance users engage in self-defeating behaviour when they get insecure attachment, rejection and abandonments from their parents. A previous study supported the present study result and literature finding which showed that psychiatric patients (Personality Disorder and Bipolar II Disorder) showed repetitively self-destructive behaviour which was affected by the parents separation and neglect [20]. Another study of Wei and Ku also supported the findings; research suggested that parent-child relationship linked negatively with Self-defeating Behaviour because of insecure attachment style and psychological distress [21]. Similarly, another study finding also support the present result as self-defeating behaviour (deliberate self-harm/suicide behaviours) influenced to the parent-child relationship or conflicts in family increased the internal symptoms as psychological factors and maladaptive behaviour [17]. The individual had insecure and rejecting relationship with their parents that cause maladaptive behaviours (self-defeating behaviour). The present study finding showed that there was a correlation of parent-child relationship (Independent variable), self-defeating behaviour (dependent variable) with demographic characteristics of participants. Parent-child relationship has significant negative correlation with request for help and positive correlate with life satisfaction. The self-defeating behaviour has significant positively correlated with age, family system, duration of drug use, and satisfied with life and negatively significant with education and marital status. The current study also explored the certain demographic variable play role to show relationship with parent-child relationship, and self-defeating in the Individual with substance use disorder was life satisfaction. The present study finding showed that life satisfaction negatively correlation with self-defeating Behaviour, Rooks-Ellis et al., also support the hypothesis and finding showed that life satisfaction negatively correlation with substance use [22].

CONCLUSIONS

It was found that parent-child relationship was negatively significant correlate with self-defeating behaviour which means that substance users engaged in self-defeating behaviour due to getting insecure attachment, rejection and abandonment in their relationship. It was found that marital status and life satisfaction predicting the relationship of parent-child relationship, and self-defeating behaviour.

Conflicts of Interest

The author declares no conflict of interest.

Source of Funding

The author received no financial support for the research,

authorship and/or publication of this article.

REFERENCES

- [1] Baumeister RF. Free will in scientific psychology. *Perspectives on psychological science*. 2008 Jan; 3(1): 14-9. doi.org/10.1111/j.1745-6916.2008.00057.x.
- [2] Teyber E and Teyber F. *Interpersonal process in therapy: An integrative model*. Cengage Learning; 2010 Jun.
- [3] Mufflin H. *The American Heritage Dictionary of the English Language*. 2000.
- [4] DiClemente RJ, Wingood GM, Crosby R, Sionean C, Cobb BK, Harrington K et al. Parental monitoring: Association with adolescents' risk behaviors. *Pediatrics*. 2001 Jun; 107(6): 1363-8. doi.org/10.1542/peds.107.6.1363.
- [5] Hart SL. Adolescent risk behavior: The effects of parents, older siblings, and peers. Arizona State University. 2000.
- [6] Noshpitz JD. Self-destructiveness in adolescence. *American Journal of Psychotherapy*. 1994 Jul; 48(3): 330-46. doi.org/10.1176/appi.psychotherapy.1994.48.3.330.
- [7] Perl E. Snatching defeat from the jaws of success: Self-destructive behavior as an expression of autonomy in young women. *Adolescent Psychiatry*. 1999; 23: 143.
- [8] Popov IV. A concept of self-destructive behavior in adolescents. *International Journal of Mental Health*. 2002 Jun; 31(2): 10-7. doi.org/10.1080/00207411.2002.11449550.
- [9] Glickauf-Hughes C and Wells M. Differential diagnosis of the masochistic personality. *Psychoanalysis & Psychotherapy*. 1991; 9(2): 167-76.
- [10] Gardner DM. *Parents' influence on child social self-efficacy and social cognition*. Marquette University; 2011.
- [11] Magaña S, Dababnah S, Xu Y, Torres MG, Rieth SR, Corsello C et al. Cultural adaptations of a parent training program for families of children with ASD/IDD: Parents taking action. In *International Review of Research in Developmental Disabilities* 2021 Jan; 61: 263-300. doi.org/10.1016/bs.irrdd.2021.07.005.
- [12] Osberger MJ, Robbins AM, Miyamoto RT, Berry SW, Myres WA, Kessler KS et al. Speech perception abilities of children with cochlear implants, tactile aids, or hearing aids. *The American Journal of Otology*. 1991 Jan; 12: 105-15.
- [13] Patel RN. Parent-Child Relationship of Teenagers. *The International Journal of Indian Psychology*. 2019 Mar; 7(1): 1: 211. doi: 10.25215/0701.023.
- [14] Khan M. Overview of substance use. 2022. [Last Cited: 1st Oct 2022]. Available at: <https://www.msmanuals.com/professional/psychiatric-disorders/substance-related-disorders/overview-of-substance-use>
- [15] Robinson SM and Adinoff B. The classification of substance use disorders: Historical, contextual, and conceptual considerations. *Behavioral Sciences*. 2016 Sep; 6(3): 18. doi.org/10.3390/bs6030018.
- [16] Hartney E and Gans S. *DSM 5 criteria for substance use disorders*. New York. 2018. Available at: <https://www.verywellmind.com/dsm-5-criteria-for-substance-use-disorders-21926>
- [17] Hunt SM. Associations between parent-daughter relationships, individual adolescent psychological functioning, and female adolescent self-defeating behaviors. Utah State University; 2005.
- [18] Armsden GC and Greenberg MT. The inventory of parent and peer attachment: Individual differences and their relationship to psychological well-being in adolescence. *Journal of Youth and Adolescence*. 1987 Oct; 16(5): 427-54. doi.org/10.1007/BF02202939.
- [19] Cloutier P, Martin J, Kennedy A, Nixon MK, Muehlenkamp JJ. Characteristics and co-occurrence of adolescent non-suicidal self-injury and suicidal behaviours in pediatric emergency crisis services. *Journal of Youth and Adolescence*. 2010 Mar; 39(3): 259-69. doi.org/10.1007/s10964-009-9465-1.
- [20] Van der Kolk BA, Perry JC, Herman JL. Childhood origins of self-destructive behavior. *American journal of Psychiatry*. 1991 Dec; 148(12): 1665-71.
- [21] Wei M and Ku TY. Testing a conceptual model of working through self-defeating patterns. *Journal of Counseling Psychology*. 2007 Jul; 54(3): 295. doi.org/10.1037/0022-0167.54.3.295.
- [22] Rooks-Ellis DL, Jones B, Sulinski E, Howorth S, Achey N. The effectiveness of a brief sexuality education intervention for parents of children with intellectual and developmental disabilities. *American Journal of Sexuality Education*. 2020 Oct; 15(4): 444-64. doi.org/10.1080/15546128.2020.1800542.