

Effects on Resilience of Alcoholics

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Abstract: This study carried out a questionnaire survey targeting 112 people in a group abstaining from alcohol and 110 people belonging to a group indulging in alcohol in order to evaluate the level of resilience and self-identity among alcoholics and identify correlations between these two factors; and to examine what influence resilience had on their relationship with alcohol. According to the study results, the following were revealed: First, resilience and self-identity were higher in the abstainer group than the alcoholic group. Second, significant correlations were found between resilience and self-identity in both abstainer group and alcoholic group. Third, self-acceptance was a sub-factor related to self-identity and this was significant in terms of resilience in the abstainer group, whereas self-acceptance and friendliness were important factors in the alcoholic group with regard to resilience.

Keywords: Alcoholics, resilience, self-identity

1 Introduction

It is very important to end the vicious circle of dependence on alcohol drinking, to correct distorted perceptions on alcoholism and to be responsible for one's own life in the recovery period. Therefore, interest in factors related to alcoholism treatment and need for recovery processes are increasing [1]. Resilience is an ability through which a person can overcome and adapt to difficulties, since he/she has a positive power inside of him/her. If potential resilience is consolidated, the problem of relapse can be prevented [2]. An alcoholic with distorted self-consciousness and negative self-image, and who suffers from identity problems has a lower sense of awareness about current realities and has difficulties in personal relations. Therefore, an alcoholic has difficulties in forming a healthy perception of him / herself [3].

Relapse into alcoholism often occurs within three months after leaving the hospital. About six weeks to six months are required to deal with physical cravings and withdrawal symptoms, and to learn specific methods to help in the recovery from alcoholism. In order to reduce the rate of relapse, intervention is very important for up to six months after giving up drinking [4], [5].

Although many studies on the recovery factors of alcoholism have been conducted [4], [5], [6], studies on the resilience and self-identity of alcoholics are lacking. In this regard, this study examined resilience and self-identity as factors that promote recovery from alcoholism, and aims to use the study results for the development of basic data to develop nursing intervention methods that bolster resilience and self-

identity latent in alcoholics.

1.1 Purposes

- 1) Identify general characteristics and relevant features associated with abuse of alcohol.
- 2) Ascertain the degree of resilience and self-identity.
- 3) Understand the degree of resilience and self-identity according to general characteristics.
- 4) Check correlations between resilience and self-identity.
- 5) Check the effects of self-identity on resilience.

2 Methods

2-1. Participants

The participants in this study were those who were receiving hospital treatment or participating in alcohol counseling centers and Alcoholics Anonymous (AA) in Gyeonggi-do, Gyengsangnam-do, Jeollanam-do, Gwangju Metropolitan City and Jeju-do. The number of total participants was 222: 112 in the abstainer group and 110 in the alcoholic group. The abstainer group had refrained from drinking for 6 months or more in the course of outpatient treatment, or was attending AA meetings or alcohol counseling centers. In the alcoholic group, a group permitted to consume alcohol, were participants who had been hospitalized for alcoholism treatment, or were participants who continued to drink after leaving hospital, or were those who had refrained from alcohol for less than six months.

2-2. Measures

• Resilience

This study used a resilience development tool [7] that was revised and supplemented [8], and that was also revised and supplemented by the researcher in this study to be suitable for adults, and it was subjected to a validity test. The tool consisted of ten questions regarding personal characteristics, 12 questions regarding the strategy to cope with the problem of abuse and ten questions regarding personal relations. The tool used a four-point Likert scale, and the higher the score was, the higher resilience was. In a study on chronic patients [8], Cronbach's α was .92, and the Cronbach's α was .93 in this study, that is, the score for personal characteristics was .90, the score for strategy to cope with the problem of abuse was .84 and the score for personal relations was .81.

• Self-Identity

This study used a self-identity tool that was developed [9], revised and supplemented [10]. This tool consisted of 48 questions in total, and was composed of six sub-factors: independence, self-acceptance, future-confidence, goal-orientation, initiative and friendliness. The tool used a five-point Likert scale. The higher the score was, the higher self-identity was. Regarding confidence in a study conducted by Song G. S. (2003), Cronbach's α was .83, and the Cronbach's α was .96 in this study, that is, independence was .80, self-acceptance was .86, future-orientation was .88, goal-orientation was .84, initiative was .82 and friendliness was .84.

3 Results

There were significant differences in terms of resilience and self-identity between the abstainer group and alcoholic group.

1) As a result of comparing the general characteristics between the abstainer group and alcoholic group, the following significant differences were revealed: gender ($\chi^2=6.97, p=.008$), religion ($\chi^2=7.20, p=.007$), marital status ($\chi^2=7.64, p=.022$), monthly income ($\chi^2=13.26, p=.001$), awareness of disorder ($\chi^2=3.88, p=.049$), average treatment period for hospitalization ($\chi^2=12.86, p=.002$) and status of participation in AA meetings ($\chi^2=38.37, p=.000$)

2) As a result of comparing the degree of resilience and self-identity between the abstainer group and alcoholic group, the following statistically significant differences between the two groups were revealed: the abstainer group and alcoholic group scored 92.4 points (13.11) and 88.0 points (12.83), respectively, in terms of resilience ($p=.006$). The abstainer group and alcoholic group scored 169.5 points (30.48), and 155.8 points (27.77), respectively, in terms of self-identity ($p=.001$).

3) The resilience of the abstainer group, according to general characteristics, revealed that there were statistically significant differences related to education level ($t=6.62, p=.003$), marriage status ($t=3.10, p=.049$), awareness of disorder ($t=-2.92, p=.004$) and the number of hospitalizations ($t=3.83, p=.025$). The resilience of the alcoholic group revealed statistically significant differences in regard to the types of medical care guarantee ($t=-2.14, p=.034$). The self-identify of the abstainer group revealed statistically significant differences in regard to education level ($t=5.95, p=.004$), monthly income ($t=4.21, p=.017$) and awareness of disorder ($t=-2.67, p=.009$). The self-identify of the alcoholic group revealed statistically significant differences in terms of education level ($t=2.63, p=.077$).

4) Looking into the correlations between resilience and self-identity in the abstainer group and alcoholic group, positive correlations were shown in both the abstainer group ($r=.74, p<.001$) and alcoholic group ($r=.64, p<.000$) in terms of resilience and self-identity.

5) Looking into the influencing factors on resilience in the abstainer group and alcoholic group, resilience was high, as self-identity was higher in both groups ($p<.000$). Self-acceptance ($t=4.60, p<.000$) revealed statistically significant

differences in terms of self-identity in the abstainer group. Self-acceptance ($t=2.76$, $p=.007$) and friendliness ($t=2.21$, $p=.029$) showed statistically significant differences in relation to self-identity in the alcoholic group.

4 Conclusions

First, resilience and self-identity were higher in the abstainer group than the alcoholic group.

Second, resilience was higher in relation to the level of education and the number of hospitalizations in the abstainer group. The resilience of the participants receiving greater medical care benefits was higher than that of participants entitled to basic medical care insurance.

Third, significant correlations were found in resilience and self-identity in both abstainer group and alcoholic group.

Fourth, self-acceptance was the sub-factor of self-identity, which was significant to resilience, in the abstainer group, and it was self-acceptance and friendliness in the alcoholic group.

References

1. Korean Academy of Addiction Psychiatry: *Addiction Psychiatry*. Seoul: (Co) MLcommunication. (2009)
2. Choi, Y. J., & Kim, H. Y.: Resilience in Children of Alcoholics. *J of Korean Alcohol Science*, 2(2), 35-40. (2001)
3. Grant, B. F. & Dawson, D. A.: Alcohol and Drug Use, abuse, and Dependence: Classification, prevalence, and comorbidity. In B. S. McCrady & E. E. Epstein (Eds.), *Addiction: A Comprehensive guidebook*, 9-29. (1999)
4. Kang, H.S. Psychology characteristics related to the relapse of alcoholism. Unpublished master dissertation, Korea University, Seoul (2005).
5. Yim, S.B.: The study on relapse factors of the alcoholics. *Journal of Social Welfare Development*, 15 (4), 383-411. (2009)
6. Yoon, M.S.: Drinking, sobriety and high risk drinking situations of discharged alcoholic patients in community, *J of Korean Alcohol Science*, 2(2), 13-25. (2001)
7. Wagnild G.M, & Young H.M.: Development and psychometric evaluation of the Resilience scale. *Journal of Nursing Measurement*, 1(2):165-178. (1993).
8. Kim, D.H.: Development of an instrument to measure resilience in children with chronic illness. Unpublished master dissertation, Yonsei University, Seoul. (2002)
9. Park, A.C.: Preliminary development of Korean adolescent ego-identity scale, *korean. Journal of Psychology*, 15(1), 140-162. (1996)
10. Song, K.S.: The Effect of university students anxiety and ego-identity on career decision level. Unpublished master dissertation, Kon-kuk University, Seoul. (2003)