

The Effectiveness of Cognitive Behavioral Group Therapy on Feeling of Loneliness and Life Satisfaction among Drug-abusing Married Men

Mohammad Khodayarifard, Alfred Pritz & Nahid Hoseininezhad

Abstract

Drug addiction is one of the prevalent aberrations in the present era, which puts lots of victims to death and imposes a heavy burden on families and societies. The purpose of the present study was to interpret the effectiveness of Cognitive Behavioral Group Therapy on feeling of loneliness and life satisfaction among drug-abusing married men. The study was a quasi-experimental research using pretest-posttest design with control group. Statistical population of the study included all the addict married men who were hospitalized in Shiraz' drug rehabilitation camps in the summer and fall of 2014. Employing convenience sampling method, 30 drug-using married men were selected; then, they were randomly assigned to experimental group (15 individuals) and control group (15 individuals). Data collection was performed by means of Satisfaction with Life Scale (SWLS), and Social and Emotional Loneliness Scale for Adults (SELSA-S). The obtained data were analyzed using SPSS software with analysis of covariance. Findings showed that Cognitive Behavioral Group Therapy has a significant effect on feeling of loneliness and life satisfaction among drug-abusing married men; and there was a significant difference between pre-test and post-test. Considering the findings of this study. It can be concluded that Cognitive Behavioral Therapy seems necessary for helping the drug addicts improve.

Keywords: CBT, Loneliness, Life satisfaction, Drug abuse

Introduction

Drug abuse and addiction are among the most serious challenges that contemporary world faces. According to the report of United Nations Office on Drugs and Crime (UNODC) released in 2015, 264 million people between 15 to 64 years of age abuse drugs. This is one out of every 20, and the number has increased by 3 million since the 2013. The compulsive need for drugs is a chronic and relapsing disorder caused by various genetic, psychological, social and environmental determinants. Like other psychological ailments, this disorder is caused by several causes (Rasouli Azad *et al.*, 2009). Carroll and Onken (2005) also maintain that several factors influence the ideology of drug abuse and that their aggregate effect initiates abuse and later leads to addiction. A detailed and specific explication of all determining parameters can contribute to an accurate plan for the prevention, diagnosis and treatment of drug abuse.

Loneliness is one of these factors. People with permanent problems in establishing and maintaining connections with others, and those who cannot satisfy their need for emotional attachments encounter impediments in their emotional and social developments and suffer from loneliness as a psychological problem (Goossens *et al.*, 2009). Literature shows that loneliness has

been conceptualized by employing other problems including depression, timidity, anger, and isolationist behaviors, but more recent conceptualizations conceive it as an autonomous psychological problem and believe that it can pose its unique threats (Cacioppo *et al.*, 2006). Notion of loneliness as a distinct diagnostic category has been under-explored. Schumaker pointed this autonomy in 1983 (Schumaker *et al.*, 1993). Peplau & Perlman (1982) defined loneliness according to the gap between the ideal and the actual levels of societal relations, both qualitatively and quantitatively. They believe the difference between the individual's ideal of societal relations and intersubjective intimacy and her actual attainment constitutes loneliness, and the more the difference, the greater her loneliness. Wood avers that loneliness is a fundamental emotion and is among the strongest human experiences. He believes that feelings associated with loneliness remind the individual of her inappropriate social relationships (Rahinzadeh *et al.*, 2012). Ghasemzadeh and Jani's study (2013/2014) showed that cognitive behavioral treatment influenced the score of participants' loneliness. Papoli & Shahangan (2015) in their study of the effectiveness of cognitive and metacognitive behavioral group therapy for loneliness found that both treatments significantly decrease loneliness. Khodabakhshi (2014) also reaches similar conclusions in that he shows spiritual cognitive behavioral group treatment can significantly decrease emotional problems including loneliness, and depression. Yet another study, Osilla *et al.* (2009) found cognitive behavioral interventions are effective in all aspects of an individual's life and can improve social relations, hence loneliness, and symptoms of depression.

Lonely people are characterized by low life satisfaction, happiness, self-esteem; alienation; timidity; sadness; emptiness; lack of charisma; reluctance to establish social relationships; small circle of friends; pessimism; inability in self-expression; aversion; and introvert personality (Davaranah, 2001). Researchers have found that there is a significant negative relationship between life satisfaction and loneliness (Henrich & Gullone, 2006). Life satisfaction is the cognitive judgmental evaluation of personal life and entails a comparison between the individual's situation and the criteria she has already set for herself (Heravi *et al.*, 2008). Satisfaction is the cognition that results from the meeting of a need (Burpee & Langer, 2005). Life satisfaction shows the individual's positive attitude to the world in which he is living. Hamid *et al.*, (2013) in their study of the effectiveness of cognitive behavioral religious-orientated psychotherapy alongside forgiveness in reducing domestic quarrels and increasing life satisfaction, also found that life satisfaction was increased in the test group. Moumeni *et al.*, (2014) in their study of the effectiveness of cognitive behavioral group psychotherapy in improving life satisfaction among drug addicts under methadone treatment found that the mean score of overall life satisfaction showed a significant change in the pre-test period. It can be concluded that this intervention was effective in improving the life satisfaction of addicts under methadone treatment. Exploring the effectiveness of stress management via cognitive behavioral method on the lives of men who abuse drugs, Karimiyan (2013) also concluded that this

method is effective. Similarly, Delsignore, Weidt, Emmerich & Rufer (2012) found that cognitive behavioral group psychotherapy can improve life satisfaction. Driessen & Holon (2011) also concluded that cognitive behavioral intervention can improve all aspects of an individual's life and significantly improve life satisfaction. Likewise, Eng *et al.* (2005) show that a group improved significantly in its social functioning and life satisfaction under cognitive behavioral treatment. McHugh *et al.* (2010) have also found that cognitive behavioral techniques, whether accompanied by medication or not, play a significant role in anxiety, depression and the management of social relationships; decrease loneliness and increase life satisfaction.

As this literature shows, from among psychological interventions, the cognitive behavioral approach is very efficient in dealing with loneliness and increasing life satisfaction. It can decrease the frequently and number of relapses, through decreasing anxiety and stress, improving social relationships, self-esteem, and the overall life satisfaction (Marlatt & Own, 2001). Fierro (2009) has showed that cognitive behavioral interventions constitute the most effective therapies in treating drug addiction. According to the cognitive behavioral theory, drug abuse is a set of behaviors acquired through imitation. As an individual learns about the effects of drug abuse on decreasing anxiety, depression, and tranquilization while it decreases one's ability for social associations, she imitates and acquires this behavior. So the most important objective of treatment of addiction lies in explicating efficient methods to control this behavior and quit abusing drugs (Moumeni *et al.*, 2014). Narimani (2004) concludes that cognitive behavioral group therapy is highly efficient during detoxification and rehabilitation in drug addicts.

Addiction is a prevalent and threatening phenomenon. Therefore, it is necessary to explore the effectiveness of cognitive behavioral group therapy on improving loneliness and life satisfaction in men who abuse drugs. The results can benefit clinics, psychology hospitals, therapists and researchers. Accordingly, this paper investigates the efficiency of cognitive behavioral group therapy on improving loneliness and life satisfaction in men who abuse drugs.

Methodology

Quasi-experimental method with pretest-posttest and a control group was employed to conduct this research. The population included all male drug abusers in the sanitariums in Shiraz during autumn and winter of 2013-2014. From among them, 30 husbands were randomly selected through accessible convenience sampling method and were divided into a test group (15 people) and a control group (15 people). Satisfaction with Life Scale (SWLS) and Social-Emotional Loneliness Scale for Adults-short form (SELSA-S) were used as the instruments to collect data.

SWLS: This scale was developed to measure life satisfaction by Diener *et al.* in 1985. It includes 5 items and uses five-point Likert style scored between 1 (totally disagree) to 5 (totally agree). Its

psycho-measurement potentials have been assessed in various studies (Hultell & Gustavsson, 2008; Pavot & Diener, 2008; Gouveia *et al.*, 2009; Swami & Chamorro-Premuzic, 2009). Pavot & Diener (2008) report the scale's test-retest reliability to be 0.84 and Swami & Chamorro-Premuzic (2009) calculate its Cronbach's alpha coefficient to be 0.83. Diener, Emmons, Larsen, & Griffin (1985) also report its correlation coefficient to be 0.82 and its Cronbach's alpha coefficient to be 0.87 in a population of 176 students. Sheykhi *et al.* (2011) calculate its internal consistency to be 0.85 and its retest reliability to be 0.77. According to Biyabani *et al.* (2007), SWLS's Cronbach's alpha coefficient is 0.83 and its retest validity is 0.69. Employing Oxford Happiness Index (OHI) and Beck's Depression Inventory, they have calculated its construct validity through convergent validity and have demonstrated that it positively correlated with OHI and showed a negative correlation with the Beck Depression Inventory. Therefore, SWLS has an acceptable level of validity and reliability.

SELSA-S: This scale was designed by DiTommaso *et al.* in 2004 according to Vis categorization (1973). It includes 15 items and three sub-scales, namely romantic loneliness (5 items), familial loneliness (5 items) and social loneliness (5 items). Each item is scored between 1 (totally disagree) to 5 (totally agree) by a five-point Likert scale. DiTommaso *et al.* (2004) report its Cronbach's alpha to be between 0.87 up to 0.90 which underscores this scale's internal consistency. They also report that there is a significant correlation between the score for social-emotional loneliness subscale and that of Russel et al's loneliness scale, and Armsden and Greenberg's Perception of Attachment Questionnaire. Such a significant correlation proves the concurrent, discriminant and convergent validity of this scale. Adamczyk & Ditommaso (2014) calculate the Cronbach's alpha for romantic, social and familial loneliness respectively to be 0.83, 0.87 and 0.84. Patou *et al.* (2013/2014) report them to be respectively 0.73, 0.66, 0.75 and 0.73 and that of the overall questionnaire to be 0.77.

Method of implementation: First, the sample size was determined and it was divided in two test and control groups, each 15 members, through random allocation. Then, our objectives were explained to the participants and their support was secured. Test group met two sessions a week, each lasting 90 minutes. Overall, there were 9 sessions of cognitive behavioral therapy which followed the procedures proposed by Khodayarifard *et al.* (2011). After the therapy term, the questioners were once again filled out and the data were analyzed.

Results

Descriptive analysis of variants including mean and standard deviation are offered in Table 1.

Variant	Group	Pre-test mean	Pre-test standard deviation	Post-test mean	Post-test standard deviation
Loneliness	Control	36.73	9.75	37.27	1.27

	Test	73.37	4.71	31.70	5.23
Satisfaction	Control	10.46	4.94	10.86	4.70
	Test	11.26	2.78	15.80	2.90

Table 1. Descriptive Analysis of Variants

Table 1 illustrates mean and standard deviation in test and control groups in pretest and posttest. The results indicate that cognitive behavioral group therapy has increased satisfaction and decreased loneliness in men who abuse drugs. Before covariance analysis of drug abusers' loneliness, the Levin test was administered as a premise of the equality of variances. The results conveyed that Levin test was not significant ($F=2.01$, $P=0.17$). So, the prerequisite of covariance has been observed.

Source of change	Total squares	Freedom degree	Mean squares	F	Significance	Squares
Pretest	18.92	1	18.92	0.19	0.66	0.7
Posttest	349.36	1	349.36	3.59	0.05	0.66

Table 2. Covariance analysis of cognitive behavioral group therapy on loneliness

The results convey that cognitive behavioral therapy has been efficient in managing the loneliness of drug abusers as the pretest means have decreased in the test group and 70% therapy was achieved according to eta square. Before co-variance analysis of the satisfaction of drug abusers, Levin test was administered as a premise of the equality of variances. The results conveyed that Levin test was not significant ($F=3.81$, $P=0.06$). So, the prerequisite of covariance has been observed.

Source of change	Total squares	Freedom degree	Mean squares	F	Significance	Eta Square
Pretest	15.18	1	15.18	0.99	0.328	0.035
Effect of intervention	185.13	1	185.13	12.10	0.002	0.310

Table 3. Covariance analysis of cognitive behavioral group therapy on satisfaction

As the results signify, cognitive behavioral group therapy was influential on the satisfaction of male drug abusers.

Discussion and Conclusion

This research aimed to investigate the efficiency of cognitive behavioral group therapy on loneliness and life satisfaction of male drug abusers. The first hypothesis was tested by administering covariance analysis. The results conveyed that cognitive behavioral group therapy can decrease the sense of loneliness. The results agree with those of Ghsemkhani and Jani (2013/2014), Papoli *et al.* (2015), Khodabakhshi (2014), and Osilla *et al.* (2009). The results can be interpreted as such: drug abusers feel dissatisfied and unhappy about themselves, their environments or both. Accordingly, they do not enjoy the company of people who believe life is worth living and are perplexed how others can adopt

to life despite its impediments. Drug abusers frequently suffer from insecurity, feelings of inadequacy, loneliness, hatred, bouts of depression, acute anxiety, and personal tensions and contradictions. One way to know oneself is through transactional analysis as employed in cognitive behavioral therapy. One principle of this approach insists that although we encounter many impediments, we can handle them rationally and wisely. Transactional analysis helps people be aware of balance in personality and tune their behavior accordingly. As Mazok asserts (qtd. in Papoli *et al.*, 2015) cognitive behavioral therapy can reduce loneliness through keen observation of evidences, accurate assessment, and facilitating approach attitudinal behaviors used to improve positive responses to circumstances. Therefore, the evaluation of loneliness and its causes can improve psychological health (Goossens *et al.*, 2009). Because humans are social beings and need the support, composure and security offered in group cooperation, the core of most emotional disorders lies in a sense of isolation and loneliness. Being a member of a group whose members share our problems can help us overcome them more easily.

The second hypothesis was also tested by covariance analysis. The results showed that cognitive behavioral therapy can improve life satisfaction. The results agree with those of Hamid *et al.*, (2013), Moumeni *et al.*, (2014), Karimiyan (2013), Delsignore *et al.* (2012), Driessen & Hollon (2011), Eng *et al.* (2005), and McHugh *et al.* (2010). The main reasons behind domestic problems lie in negative interactions, lack of communication between husband and wife, misunderstandings distorted thoughts. Therefore, in this approach, therapy is designed in a way that negative and automatic thoughts and cognitions are recognized and the relationship between cognition, feelings and behaviors is specified. Contrary evidence is used to explore distorted thoughts, and to substitute them with realistic interpretations. This will pave the way for solving domestic problems and increasing adoptability and life satisfaction. Yet another interpretation of the results can be that the more the distance between the individual's desires and his contemporary situation, the less his life satisfaction will be. So, life satisfaction is a determinant of one's evolution of one's standing, cultural context, value system, goals, expectations and standards. Cognitive behavioral therapy helps people find their positive characteristics and appreciate their intrinsic value. Martel *et al.*, 2004 (qtd. in Papoli *et al.*, 2015) also explain the efficacy of this method by maintaining that participants learn to change their lifestyle during therapy and follow different rules in their lives. Drug abusers usually create a rather satisfactorily world in their imaginations. This imaginary world lacks any foundation in the reality of the individual and his environment; instead, it depends on their need for drugs and their psychosomatic impact. Cognitive behavioral therapy helps them remove themselves from this ideal yet imaginary world through cognitive reconstruction by means of replacing rational for irrational conceptions.

This research suggested the efficacy of cognitive behavioral therapy on life satisfaction and loneliness. Thus, as cognitive behavioral therapy is effective in prevention of personal problems in drug abusers, it is necessary for specialists to design therapies based on these problems in order to reduce the negative impacts of such disorders on personal and interpersonal aspects of life. This research can also assist therapists in their assessment of their clients. Finally, it is also suggested that other therapies that can help to solve the problems of drug abusers should also be further explored.

Authors

Mohammad Khodayarifard, Ph.D., Professor and Dean of the Faculty of Psychology and Education, University of Tehran.

E-mail: khodayar@ut.ac.ir

Alfred Pritz, Ph. D. Professor, Sigmund Freud University

E-mail: alfred.pritz@sfu.ac.at

Nahid Hoseininezhad, M.A. in family counseling, University of Tehran.

E-mail: Nhoseininezhad70@gmail.com

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