

Assessment Coping Skills and Drug Craving among Addicts

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Abstract

Background: Drug craving has been defined as tendency or compulsion to abuse substances. Coping skills approach provides a systematic way assessing the full range of antecedents' and consequences of abusing drug that influence an individual's craving potential and devising interventions to deal with them that are likely to reduce the probability of future relapse. **Aim** assess coping skills and drug craving among addicts. **Study design:** a descriptive exploratory design was utilized to conduct this study. **Setting:** this study was conducted in the Heliopolis psychiatric Hospital. **Subject:** convenience sample of thirty patients suffered from drug craving at the addiction outpatient clinic, **Data collection tools:** 1) Socio-demographic interview questionnaire to assess the socio demographic characteristics of study sample and data related to the previous history of drug abuse and relapse. 2) Drug craving questionnaire that was used to assess variable contributing to craving among drug abuse. 3) Coping Behavior Inventory (CBI) that was used to assess coping skills among drug craving patients. **Results:** The present study revealed that youth aged between twenty-five to thirty-five years were the most prone to multiple craving factors. **Conclusion:** this study concluded that there was high statistically significant positive correlations between the drug craving and coping skills. Recommendations: A hotline must be available to solve immediate problems of craving patient. Expand primary health care services in community services frequently used by patients with drug craving.

Keywords: Drug craving, High risk factors, Coping.

Introduction

Drug addiction is a major problem in society ruining the life and leading to use of national assets for combating addiction and its defects. Unfortunately, the number of addicts is gradually elevating that suffer from its physical, mental, cultural, familial, economical, as well as social consequences of addiction (Jalilian, Karami, Ahmadpanah, et al., 2015).

Drug craving has been defined as tendency or compulsion to abuse substances the studies have shown that drug craving disrupts attention in addicted ones and the individuals who experience relapses are more motivated by substances in comparison with other addicts and thus, the former group experience drug craving more (Ahmadpanah, Alavijeh, Allahverdipour, et al., 2013).

Concerning causes of craving, the factors or high-risk factors situations that can precipitate or contribute to craving episodes, include situations as upsetting or negative emotional state, social pressure to get high, interpersonal problems or relationship conflicts, positive feeling and desire to celebrate and lack of social support (Sayette, 2016).

Coping skills an action, a series of actions, or a thought process used in meeting a stressful or unpleasant situation or in modifying one's reaction to such a situation. Coping strategies typically involve a conscious and direct approach to problems, in contrast to defense mechanisms (Kato, 2020).

Coping skills increase resilience because they help patient learn how to properly handle negative emotions, panic attacks, and other difficult situations. When you effectively deal with a negative emotion or situation, you also

move on and let go of the negative feelings that are associated with that experience (Algorani, & Gupta, 2020).

Commonly used coping mechanisms include changing one's perception of the issue at hand, using humor, using problem solving skills, employing stress management and relaxation techniques, seeking out and using the support of others, ventilating feelings, embarking on a physical exercise and activity routine, decreasing personal expectations, and avoiding self-blame (Somers, & Casal, 2020).

Substance abuse nurses often play a teaching role in addition to providing physical care. They teach patients about the dangers of drug abuse, including the physical and psychological effects; the damage to relationships and family life; and the impact on meeting basic needs such as holding down a job. They also educate patients regarding treatment options, including those they can use on either an inpatient or outpatient basis, and those they can use to stay drug-free long-term. Nurses might also educate a patient's family members about what to expect from the rehab process and how they can support their loved one's attempt to conquer drug addiction (Public Health England (PHE), 2017).

In this regard, studies have indicated that the ability to deal efficiently can reduce symptoms of psychopathology and thus by modifying appropriate psychiatric nursing intervention program become a must for providing the patients suffering from drug craving, by global strategies and skills needed for coping with these situations in order to develop alternative ways for avoid or manage high risk factors of craving without using drugs as identifying high risk situations for each patients (Imkome, 2018).

Significance of the Study:

Substance abuse is becoming a serious mental health problem in Egypt as

there is an increasing number of addict patients as indicated by the *National Addiction Report (2017)* the prevalence of addict patients was 20.6%.

Craving has been described as one of the major factors related to relapse to drug, alcohol, and/or tobacco use, a critical factor in treatment drop-out, and is a topic of discussion in most substance abuse treatment programs, particularly in relapse prevention work (*Abuse, & US, 2016*).

Coping is the combination of thoughts and actions to deal with a threatening situation. It occurs in response to physical or psychological stress and manifest as behaviors, thoughts, or emotions that use to adjust to triggers or changes in life. Stressors are normally described as negative events such as the death of a loved one, a sexual, physical, or emotional trauma or abuse, loss of a job, or a divorce. However, positive events like a new job, marriage, birth, or moving can also contribute to your stress levels and require coping skills (*Jacobs, 2020*).

Aim of the Study

The current study aims to assess the level of coping skills and drug craving among addicts.

Subjects and Methods:

Setting:

The study was conducted in outpatient clinic in Heliopolis psychiatric Hospital and suffering from a drug craving.

Subjects:

The current study comprised of convenience sample used to achieve the chosen as the number of available drug craving patients of the present study were 30 patients.

1) Research design

A descriptive study design was used.

Tools for data collection

Tool (1): A) Socio- demographic interview sheet (Appendix I)

This questionnaire was constructed by the researcher after reviewing literature in the field of drug abuse and drug use.

This interview sheet comprised of two parts:

The first part: It deals with the socio demographic characteristics of study subject which includes age, sex, marital status, level of education, occupation and monthly income (L.E).

The second part: It includes data related to previous history of drug use such as; types and nature of drug abused before and after relapse, duration of abuse, number of relapses, duration of abstinence and treatment related barriers against abstinence.

B) Drug craving questionnaire: (Appendix II, pre/ post formats):

This questionnaire designed by Singleton et al., (1995), to assess biological, psychological, and environmental factors and related high-risk situations leading to craving, which consist of 74 statements of high-risk situations that lead to craving.

❖ **Scoring System of craving scale on drugs:**

The scoring system was adopted with rating ranging from 1 (apply) to 2 (not apply) point for each item. Each question response was either apply (1 grade) and not apply (2 grade).

Score % = (the observed score / the maximum score) × 100

The total item 74 and tot score was from 74-148 grades:

- Craving High <60% [74-89]
- Craving Low >60% [90-148]

C) Coping behaviors Inventory (CBI) (Appendix III)

It was originally designed by Litman, Stapleton, Oppenheim, and Peleg, (2008), to assess coping behaviors among drugs craving patients. It consists of (36) items of coping behaviors with psychosocial and environmental triggers

leading to craving as relaxation, positive self-talking, sleep and rest, help group etc.

❖ **Scoring system of coping behaviors inventory:**

The scoring system was adopted with rating ranging from 1 (never) to 3 (often) point for each item. Each question response was either never (1 grade), sometimes (2 grades) and often (3 grades). Score % = (the observed score / the maximum score) × 100

The total item 36 and total score was from 36-108 grades:

- Low behaviors <50% [36-54]
- Average behaviors 50-75% [55-81]
- High behaviors >75% [82-108]

2) Operational Design:

The operational design includes preparatory phase, pilot study, and field work.

Phase I: Preparatory phase (data collection)

It includes reviewing of related past, current, local and international literatures as well as theoretical knowledge of various aspects of the study using books, articles, internet, ad magazines to develop tools for data collection.

Phase II: (Exploratory phase):

Pilot study

The aims of pilot study were

- Identify any unexpected obstacles and problems.
- Ensure the clarity of the assessment sheet.

A pilot study was carried out after the adaptation of the tools and before starting the data collection. A pilot study was carried out in the first half of September, 2019. It was conducted on (10%) of the expected sample size to test the clarity, feasibility and applicability of the study tools. In addition, it served to estimate the approximate required time for interviewing the drug craving patient as well as to find out any problems that might interfere with data collection. After

obtaining the result of the pilot study, there were no modifications of tools.

Tools validity and reliability:

To achieve the criteria of trustworthiness of the tools of data collection in this study, the tools were tested and evaluated for their face and content validity, and reliability.

Face and content validity were tested by seven expertise in three different specialties in public health nursing, mental health nursing and nursing administration. They were from different academic categories, as, professors and assistant professors to ascertain relevance, clarity and completeness of the tools, experts elicited responses, which were either agree or disagree for the face validity and content radiality.

Field work:

The actual field work for the process of the data collection had consumed. After an official permission was obtained from the director of Heliopolis psychiatric Hospital to precede the study, the researcher embarked on field work. Data collection for this study was carried out within a period 3 months, started at the first of July 2019.

Ethical Considerations:

The research approval obtained from Scientific Research Ethical committee in Faculty of Nursing at Ain Shams University before starting the study. The researcher assured maintaining anonymity and confidentiality of the subject data. The addict patient informed that they are allowed to choose to participate or not in the study and that they have the right to withdraw from the study at any time.

Statistical design

The collected data were organized, analyzed using appropriate statistically significant tests. The data were collected and coded using the Computer Statistical Package for Social Science (SPSS),

version 20, and was also used to do the statistical analysis of data.

Quantitative data were expressed as mean± standard deviation (SD). Qualitative data were expressed as frequency and percentage.

The following tests were done:

- Chi-square (χ^2) test of significance was used in order to compare proportions between qualitative parameters.
- Pearson and (t) tests were used to compare frequencies and correlation between study variables and using a nova test for measuring quantity.
- Pearson's correlation coefficient (r) test was used to assess the degree of association between two sets of variables.
- The confidence interval was set to 95% and the margin of error accepted was set to 5%. So, the p-value was considered significant as the following:

Probability (P-value)

- P-value ≤ 0.05 was considered significant.
- P-value ≤ 0.001 was considered as highly significant.
- P-value > 0.05 was considered insignificant.

Limitation of the study:

Delaying patients to the appointment of the group, sometimes some of the hospital's treating team overlaps the group. In addition, the number of female patients was small compared to the number of male patients, which led to a lack of comparison between them.

Results:

Table (1): shows that, more than two fifth (43.3%) of addict patients under study were in age more than 35 and at university level and their monthly income 1000->1500 L.E. Regarding their occupation, it was found that 36%of them were students and 40% living with their parent and all of them were in rehabilitation stage.

Table (2): This table represents that, there a highly statistically significant was observed as regards patients' level of where a high level of craving (66.7%) was found.

Table (3): shows that, there was highly statistically significant was observed

as regard coping behaviors inventory level of patient (50.0%)

Table (4): shows that there were **statistically significant relations** between the patients regarding level of craving scale on drugs and their level of coping behavior inventory, with p-value <0.05 S.

Table (1): Distribution of the studied sample according to their socio-demographic data and admission data (N=30).

Socio-demographic data	No.	%
Gender		
Male	26	86.7
Female	4	13.3
Age (years)		
18>25 years	5	16.7
25>35 years	12	40.0
35+ years	13	43.3
Mean±SD	31.50±5.92	
Marital status		
Single	2	6.7
Married	17	56.7
Divorced	11	36.7
Presence of children		
Yes	23	76.7
No	7	23.3
Level of education		
Read & write	2	6.7
Primary school	9	30.0
Secondary & technical school	6	20.0
University level	13	43.3
Occupation		
Don't work	5	16.7
Student	11	36.7
Technical worker	6	20.0
Professional worker	8	26.7
Monthly income (L-E)		
> 500 LE	6	20.0
500-> 1000 LE	6	20.0
1000->1500 LE	13	43.3
1500 + LE	5	16.7
Residence		
Alone	8	26.7
With parents	12	40.0
With husband and children	10	33.3
Therapeutic stage		
Rehabilitation	30	100.0
Detoxication	0	0.0

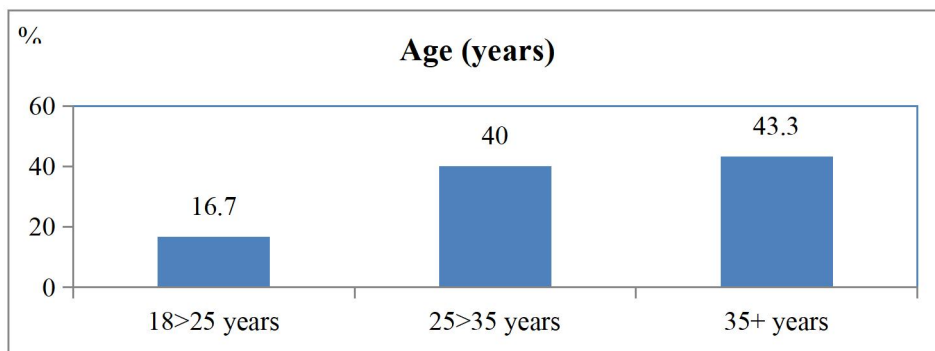
Fig. (1): Percentage distribution of the studied samples according to their age (years)

Fig. (1): represents that, slightly more than two fifth (43.3%) of the studied sample were between the age of 35+ years, (40%) of them were between the age of 25>35 years, and (16,7%) were between the age of 18>25 years.

Table (2): The total score of patients according to their level of craving scale on drugs (N=30).

Level of craving scale on drugs		
	No.	%
Craving High	20	66.7%
Craving Low	10	33.3%
Total	30	100.0%

***p*-value <0.001 HS

Table (3): The total score of patients according to their level of coping behaviors inventory (N=30).

Coping Behaviors Inventory		
	No.	%
Low behaviors	15	50.0%
Average behaviors	12	40.0%
High behaviors	3	10.0%
Total	30	100%

***p*-value <0.001 HS

Table (4): Correlation between patients regarding Level of craving scale on drugs and their level of Coping Behaviors Inventory (N=30).

Level of coping behaviors inventory	Level of Craving scale on drugs				Total	
	Craving Low		Craving High		No.	%
	No.	%	No.	%		
Low behaviors	0	0.0%	15	75.0%	15	50.0%
Average behaviors	7	70.0%	5	25.0%	12	40.0%
High behaviors	3	30.0%	0	0.0%	3	10.0%
Total	10	100.0%	20	100.0%	30	100.0%

***p*-value <0.001 HS

Discussion

The results of the present study revealed that, patients in the age group 35+ years constitute the highest percentage among drug craving patient's understudy.

This result may be due to lack of interpersonal skills to cope with daily life stressors such as establishment of career and lack of involvement in more productive work, lack of meaningful goal for life in the absence of future plan, Limited financial resources and inability to meet demands of life.

This result agreed with *Namazpoor, et al., (2017)*, who found that most patient who are drug craving from the age group 35+ years, mentioned that precipitant of drug craving patients for this age group appear as inability to cope with interpersonal stressors, failure to find satisfying job, lack of mutual relationship and loss of family or social support.

Regarding to their craving about "places and things, the current study that revealed that the patient under study complain from sever craving score was reported to with p-value <0.05 S.

This could be due to the fact that stopping thought strategies and assisting the patient to identify cognitive errors helped the patient to develop healthy coping response to this negative thought and reduce its severity.

This result is congruent with *Mohamed et al., (2015)* who explain that practicing cognitive recon structuring and reframing skills can redirect the patients with drug abuse craving toward more positive thoughts and maintain positive behaviors that promote recovery from addiction.

Regarding to social reason, this study showed that almost three quarters of craving patients under study were craving to drug for ability to confront the hard situation and share the peer pressure, when patient's used coping skills training and acquiring other social skills needed for limiting high risk

relationships that inhibit recovery from craving.

This result is supported by *Singh et al., (2020)*, who clarified that training the patients in drug abuse on how to cope with offers to use drugs and practicing drug refusal skills make the relapsed patients able to responds quickly and convincingly with crave factors once they arise.

Concerning the level of coping among drug craving patients, the result of the current study revealed that there statistically significant relations between the patients regarding level of craving scale on drugs and their level of coping behavior inventory, with p-value <0.05 S.

This could be due to lack of the psychiatric nursing intervention program to help the patient to develop new strategies for coping with high-risk situations and environmental factors of craving and making lifestyle changes to decrease the crave for drugs These coping strategies include urge management, relaxation techniques, refusal skills, relapse prevention, and cognitive reconstructing skills.

This study finding is supported by *Ahmadpanah et al., (2013)* who found that training the craving to drug patients on coping with high-risk situations of craving could reduce the possibility of craving. As intervention strategies include refusing drugs in social situation, anger management skills, stopping for negative thought techniques, laps management skills, relaxation technique for tension, and anxiety.

This consistence with *Carreiro et al., (2020)*, who mentioned that teaching the recovered patients from drug craving and urge management skills could be promoting coping and improving abstinence including recalling unpleasant experiences that result from using, anticipating the benefits of stopping addiction, seeking support during episodes of urge or craving.

This could be due to the greater influence of relaxation on mental and physical state. It's an effective way of coping with various high-risk situation of craving exacerbated by drug use as tension, stress, anger, anxiety, sleeplessness, and craving to drugs. The effect of relaxation is achieved through focusing on relaxing the muscle of the body and the thoughts associated with relaxation begin to craving those associated with tension, so negative emotional state can be prevented or reduced.

Similar explanation was given by *Mead & Honours, (2020)*, who mentioned that relaxation technique is the first anxiety, tension, craving and other negative emotions before they become out of hand. It can break the chain of unpleasant events or thoughts before the patient reach the weak point of negative emotions that's better than focusing on what happened after the feeling occurs.

Conclusion:

The current study conducted on 30 patients with drug craving, to assess the level craving to drug and coping related to substance abuse. It concluded that, the drug craving patients under the study had high levels of craving Also, there were highly statistically significant positive correlations between total level of craving and their level of coping behavior inventory .

Recommendations:

Clinically:

A hotline must be available to solve immediate problems of the patients with drug craving.

For researcher:

- Further studies are needed to focus on identifying factors that are predisposing factors with drug use in coping and increasing vulnerability to crave.
- Further researches on how to decrease social stigmatization among family caregivers of patient with drug addiction.

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