

Occurrence and pattern of traumatic experiences among the patients with substance abuse

Abstract

Background: Traumatic experiences such as neglect, physical abuse, and sexual abuse are very common in the society and like in United States it has alarming rates in India and Kashmir valley as well. On the other hand, studies have shown relationship between traumatic experiences and drug addiction. **Aim:** To study was conducted to assess the relationship of childhood trauma and recent traumatic experiences. **Method:** Purposive sampling was used to assess the role of traumatic experiences in drug addiction. A sample of 60 patients between the age group of 15-45 was taken both from IPD and OPD at drug de-addiction center IMHANS-K GMC Srinagar. They were interviewed by using the scales of childhood traumatic questioner and recent traumatic scale. **Results:** Findings showed that victim of violence was predominant (68.7%) and trauma has changed the life of most of the patients (78%). This has mostly resulted in substance abuse in such patients. Demographic variables i.e. Gender, Age and Marital status had significant association with Childhood Trauma and Recent Trauma at 0.01 level.

Keywords: Childhood traumatic, Recent traumatic, Substance use..

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Introduction

Traumatic experiences such as neglect, physical abuse, and sexual abuse are very common in the society considered a major public health problem in United States^{1,2}; it has an alarming rates in India and Kashmir as well, that are significantly associated with the number of psychiatric illnesses and substance use in teenagers and adulthood (APA, 2002). On the other hand, studies have shown relationship between traumatic experiences and drug addiction². Keeping in view the increasing trend in substance

abuse in Kashmir valley, this study was conducted to assess the occurrence and pattern of traumatic experiences among the patients with Substance Abuse visiting IMHANS-K, GMC Sgr. Nearly 25 percent of children and adolescents have experienced some sort of trauma. According to Adverse Childhood Experiences (ACE) Study, one of the biggest studies regarding the effects of childhood trauma found that “children who had experienced abuse and neglect are at high risk for smoking, alcoholism, and drug abuse as adults, as well

as are engaged in high-risk sexual behaviors. It also suggests that those having history of child abuse and neglect are 1.5 times more likely to use illicit drugs, in middle adulthood besides childhood abuse and neglect have negative effect on the ability of both men and women to establish and maintain healthy intimate relationships in adulthood². However evidences reveal childhood is highly formative developmental period, exposure to trauma and its co-occurring stress is associated with adverse effects on neuro development and various neurological functions, including cognition, memory, and affect regulation (Costello, Erkanli, Fairbank & Angold, 2002; Kishore, Theall, Robinson, et al., 2008). According to National Survey of Adolescents, teens that had experienced physical or sexual abuse/assault are three times more prone to develop past or current substance abuse than without a history of trauma. However surveys have reported that adolescents who are receiving treatment for substance abuse, more than 70% of patients had a history of traumatic experiences (Sullivan & Holt, 2008). Emotional abuse, rape, sexual assault, the death of a loved one, being the victim of a crime or accident, and catastrophic natural disasters are all examples of traumatic events that may have an impact on substance abuse and addiction. Sources estimate that between 25 to 75% of people who survive abuse and/or a violent trauma develop issues related to substance abuse.

10 to 33% of survivors of accidents, illnesses or natural disasters report having a substance use disorder. A diagnosis of post-traumatic stress disorder (PTSD) increases the risk of developing a substance use disorder.

Male and female sexual abuse survivors experience a higher rate of drug and alcohol use disorders compared to those who have not survived such abuse (Cotter et al., 2001). The present study is focused on role of childhood trauma and recent traumatic experiences that examined and extended findings showing that there is positive link

between childhood trauma experiences and substance use.

Method

Purposive sampling method was used to assess the role of traumatic experiences and drug addiction. 60 patients were approached who fulfilled the eligibility criteria at IPD and OPD of drug de-addiction center IMHANS GMC Sgr. Data was collected from 20 November to 20 December 2018-2019. Total patients visited IPD and OPD during this month were 120. By using solving formula of sample size $n = N / 1 + Ne^2$ with a margin error of 10% (0.01) sample size was calculated as 57.14.

Sample- A total of 60 participants were included in the study, with a greater number of males (N = 58, 96.6%) than females (N = 3.33%).

Inclusion criteria- (1) Above 15 years old, male or female; (2) Able to give informed consent (3) willing to participate in day of interviews. (4) IPD and OPD patients.

Exclusion criteria- 1) Mental retardation (2) psychotic disorder.

Tools

Demographic data such as Gender, age, marital status, education, socioeconomic class, occupation and Birth order adopted from Kuppawammy socio-demographic scale was used.

A semi-structured modified Childhood Traumatic Event Scale and Recent Traumatic Event Scale by Penne baker and Susann, (2013) related to Divorce, Death, Violence, Child abuse, sexual abuse was used to assess the childhood trauma and recent traumatic experiences by the subjects at drug de-addiction center.

Statistical Analysis

An analysis was done by using SPSS 16.0 software.

Descriptive statistics was applied on demographic data and Childhood Traumatic Event scale & Recent Traumatic Event scale. Childhood which was calculated and expressed in terms of the total number of subjects and percentages of the sample.

Chi square test was used to test significance of demographic data in case of childhood traumatic scale only.

Results

Table 1 Shows association of Demographic Variables

Demographic Variables		Frequency (percentage)		χ^2	df	level of significances
Gender	Male	58	(48.7%)	52.27	1	0.001*
	Female	2	(1.7%)			
Age	15-25.	36	(30.3%)	25.60	2	0.001*
	25-35	20	(16.8%)			
	35-45	4	(3.4%)			
Education	Postgraduate	5	(4.2%)	9.25	6	0.365
	Graduate	11	(9.2 %)			
	Intermediate	15	(12.6%)			
	High Class	9	(7.6%)			
	Middle Class	5	(4.2%)			
	Primary	6	(5.0 %)			
	Illiterate	9	(7.6%)			
Occupation	Unemployed	15	(12.6 %)	10.83	4	0.294
	Unskilled	5	(4.2%)			
	Labour	10	(8.4%)			
	Clerk,Shopkeeper	20	(16.8%)			
	Professional	10	(8.4%)			
Socioeconomic status	Upper class	10	(8.4%)	6	4	0.199
	Upper middle	16	(13.4%)			
	Lower middle	16	(13.1%)			
	Upper lower	12	(10.4%)			
	Lower class	6	(5.0%)			
Marital status	Married	15	(12.6%)	15	1	0.001*
	Un married	45	(37.8%)			
Birth order	Elder	42	(35.3%)	14.53	3	0.002*
	Middle	49	(41.2%)			
	Younger	25	(21.0%)			

*Level of significance 0.01

Table2. Describes the frequency and percentage distribution of questions item wise N=60

Variables		ChildhoodTraumaticEvent Scale		Recent Traumatic Event Scale	
		Frequency	Percentage	Frequency	Percentage
Death of close friend /family member	Yes	38	63.3	21	34.4%
	No	22	36.6	39	63.9%
Trauma due to separation/divorce	Yes	28	46.7	20	32.8
	No	32	53.3	40	65.6
Traumaticsexual experiences	Yes	33	55	21	34.4
	No	27	45	39	63.9
Trauma due to victim of violence	Yes	47	78.3	50	82
	No	12	20%	10	16%
Trauma due to Illness	Yes	27	45%	22	36.1%
	No	33	55%	38	62.3%
Trauma due to change in workplace	Yes	42	70%	44	72.1%
	NO	15	25%	16	26.2%
Trauma that changed your personality	Yes	45	75%	29	47.5
	NO	15	25%	31	50.8%

Discussion

The current study confirms the findings of occurrence and pattern of Traumatic Experiences among the patients with Substance use visiting IMHANS-K, GMC Srinagar. It was found that majority of patients were lying in the age group of 15-25 (60%), had intermediate qualification (25%), unmarried (45%), with occupation of Labour and shopkeepers (33.3%), middle class family (60%) with elder birth order (38.3%). While applying the Childhood Traumatic Event scale, physical abuse/victim of violence was predominant 78.3%, 63.3% subjects had trauma due to death of close friend/family member, 55% subjects had traumatic sexual experiences, that lead them victim

of substance use disorder and has changed their life (75%) and their kind of work they did (70%). Subsequently Recent Traumatic Event Scale shows the findings as, majority of subjects revealed Trauma due to Physical abuse (82%), 34.4% subjects had experienced trauma due to death of a close friend and family member as well as sexual abuse. In the same way subjects revealed that their personality has definitely changed (47.5%) and had changed their kind of work (72.1%).

Therefore findings reveals that traumatic experiences are significantly linked with substance use and other mental health issues. There are increased rates of injury³, death and physical assault 2-3 times high in substance using individuals than in

general public (Kingston & Raghavan, 2009). Studies related to substance use, childhood traumatic experience confirms that there is strong relationship between adverse childhood traumatic experience and subsequent substance use and poor mental health outcome (Wu, Schairer, Dellor & Grella, 2010). Hence the current study reveals occurrence and pattern of Traumatic experiences among the patients with substance use disorder. In this study the subjects who visited the IMHANS-K on OPD/IPD basis, became the victim of violence that has changed their life and involved them in substance use as of their poor coping, other factors may also contribute to substance use disorder. Demographic variables i.e. Gender, Age and Marital status had significant association with Childhood Trauma and Recent Trauma which was measured by Chi-square test that shows that childhood trauma and recent traumatic experiences definitely affects a person and lead them to drug addiction (Kingston & Raghavan, 2009; Clark, Lesnick & Hegedus, 1997).

Conclusion

Several studies need be done in regard of parenting style, child neglect and abuse and job satisfaction of people living in Kashmir in order to prevent the substance use and mental illnesses. Because as researcher we find the other causes of drug addiction more than a conflict war in Kashmir zone. Hence the study revealed that there are some other reasons for drug addiction as the findings has shown the percentage and occurrence of physical abuse/victim of violence was predominant 78.3%, 55% subjects had traumatic sexual experiences, that lead them victim of substance use disorder and has changed their life (75%) and their kind of work they did (70%). Subsequently Recent Traumatic Event Scale shows the findings as, majority of subjects revealed Trauma due to Physical abuse (82%). In the same way subjects revealed that their personality has definitely changed (47.5%) and had changed their kind of work (72.1%), as evidenced by the researches done.

Conflict of Interest- Researcher works in Drug De-addiction Centre of IMHANS-K and found that there

are some other reasons for drug addiction when taking history from the patients who were admitted and this study has not been done till date in Kashmir. Also from review literature it is clear that trauma during childhood affects personality of person and approaches negative coping in their life which in turn causes drug addiction and mental illnesses.

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Ethical Clearance- Permission was taken HOD IMHANS-K and ethical committee of GMC Srinagar.

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¹<https://www.ncbi.nlm.nih.gov/articles>.

²Www: ash wood recovery.com/the connection-between trauma & Addiction, December 5-2015, cited on 1 June 2019.

³<https://neaddictions.com/trauma-substance-abuse>.