Research Article

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Received: 2 September 2023 / Accepted: 30 December 2023 / Published: 5 January 2024

Substance Use Disorder, Parenting Styles and Interpersonal Competency: A Review

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DOI: https://doi.org/10.36941/jesr-2024-0015

Abstract

The epidemic of substance addiction among young people is increasing at an alarming rate, owing to altering cultural norms, strong competition in the sectors of school and job, mounting financial hardship on families, and eroding supportive links for children during this time of transition. As a result, many young individuals have their first encounters with drugs, particularly those that are easily accessible, such as inhalants, cigarettes, cannabis, and alcohol. Scientists have defined four basic parenting styles - Authoritarian, Authoritative, Permissive, and Neglectful - in this area of research and attempted to discover which style has the highest association with the onset of alcohol and drug use during adolescence and early adulthood. The evidence is more apparent from the earlier literature that the neglecting and authoritarian parenting pattern significantly linked with high risk of drug use, alcohol. On the other hand the permissive and authoritative parenting patterns related to low risk of drug and alcohol use. In this paper, article has been reviewed from various research conducted on this matter in the past with an aim to identify the gaps and raise awareness in the general population so that the onset of SUD in youngsters can be prevented with corrective measures. Another goal of this article is to identify how parenting styles are linked to the development of interpersonal competency and if it results in additional mental health issues on top of Substance Use Disorder.

Keywords: Substance Use Disorder, Parenting Styles, Mental Illness, Drug Addiction
1. Introduction

The person who have the issues related to the substance use disorders (SUDs) typically observe having experienced childhood hardship, which is frequently related to dysfunction of their parent, either father or mother. However, with opiate-addicted patients, this issue has received little attention. According to DSM-IV the substance use disorders can be diagnosed by taking the history related to suicidal attempts, and their structure of family, and caregiver change at the childhood phase. The couple who have their perception related to the parental connection using the MOPS, both the parent showed different score. The dimension related to mother neglects were substantially connected with earlier phase of life of initiation of several substance use, frequency related to hospitalizations, and issue connected with suicide attempt. In multivariate models, the majority of these relationships remained significant. The MOPS questionnaire was used for the first time to assess a six-person representative sample of outpatients with SUDs. Given its high acceptability and connection with multiple major correlates of SUDs, it should be used to develop attachment and familial management strategies, as well as gene-environment research models. According to numerous studies (Becoa et al., 2012; Demuth & Brown, 2004; Hoffman, 2015; Loeb & Stouthamer-Loeb, 1986; Ryan, Jorm, & Lubman, 2010; Velleman, Templeton, & Copello, 2005; Wasserman & Seracini, 2001), the parenting may have differ in terms of the quality which can be unique philosophy of thought and have a risk as well as protective factor for substance use and other types of delinquent behaviors.

Problematic parenting is at one end of the parenting behaviour spectrum and is defined by antagonistic, brittle connections between parent and kid as well as by inadequate supervision, monitoring, and discipline. Child substance usage, including early onset substance use, is projected to result from this parenting approach. Furthermore, children who engage in externalising or attention deficit behaviours may have influence on how their parents respond to the children, leading to less attentive and efficient parenting (Moffitt, 1997; Patterson, Reid, & Dishion, 1992; Thornberry & Krohn, 2005). If these behaviours have a negative impact on parenting style, parenting style may act as a mediation factor in the association between externalising or attention deficit behaviours and the early initiation of substance use. Several researchers, including Lansford et al. (2011), Sitnick et al. (2014), and Vuchinich, Bank, and Patterson (1992), have discovered evidence to support this association. The latter study discovers that middle adolescent parenting and early childhood externalising behaviours have an indirect impact on youth substance use. They also consider peer who are using substance at the phase of middle adolescence and externalising behaviours observed in terms of mediating factors. Overall, the research on the association between early behaviour problems and substance use has not fully investigated the potential moderating impact of parenting. Donovan (2004) urged for greater research to explore for protective factors that would buffer this association while analysing data on early conduct problems and substance use. Even fewer studies have looked at parenting as a potential moderator and mediator of the association between early substance use and conduct problems in children.

2. Gaps in Research

Stigma around substance use itself plays a huge role in creating gaps in research. The parents of the affected individuals shy away from participation due to the fear of being discredited and experiencing prejudice and discrimination. The general public, even the ones involved in healthcare and justice system view it as a characteristic flaw and moral weakness despite the fact that medical science had concluded substance use as a complex brain disorder long ago. Substance users internalize this stigma and feel shame when it comes to participating in studies and asking for help. Lack of participation and data to work with cause hindrance in establishing a profound cause and effect relationship between parenting and substance use in youngsters.
3. Objectives

The major objectives of this article are to identify the dysfunctional patterns in parenting and giving the parents an opportunity to catch up with their youngsters to prevent or aid in the recovery of SUD. Also, to figure out if there is a link between problematic parenting styles and socio-personal competence in young adulthood of the affected. How a combination of both might cause additional mental disorders on top of SUD will be discuss in the process as well.

4. Methodology

The following methodology was used for writing this current article: The authors chose to review the articles which were relevant to the search criteria of the key words such as substance use disorder, parenting style and interpersonal competency by using the Google search engine and Google scholar, as well as research gate. Search was done between May 2023 to July 2023. More specifically those articles were included which were focused primarily on the linkage between substance use and interpersonal competency.

5. Influence of Parenting Styles in Early Life

Although it has been established in the past that authoritarian and neglectful parenting styles are put the young individuals at a higher risk of alcohol and drug use cases, the most common negative patterns are less discussed. Mostly because of a lack of receptivity and openness on the parents’ part and the infamous stigma around substance use in the society. It has been notices that majority of parents of the affected individuals take it upon themselves and tend to focus more on the failure of parenthood and the guilt or shame that comes with it instead of being truly open to learning more about the causes, rectification and support their children through recovery.

5.1 Authoritarian Parenting Style- High Expectations, Little Nurturing

A classic style of parenting which places high expectation on the children but offer little to no nurturing. They ‘see’ their children but not ‘hear’ them out. This parenting style enforces disciplines and strict rules, offer little choices and flexibility, involves yelling and punishing and feedback is given in the form of nagging or shaming. The parent-child relationship is full of mistrustfulness and impatience on the parents’ side. Growing up with authoritarian parents might influence the individual in two ways. They either give into their parents’ demands and lead a life full of regrets or rebel against the parents and start displaying antisocial behaviours. The lack of warmth and affection often makes these individuals doubt if they are really enough and worthy of love and respect.

For the former group, these individuals are prone to suffering from mental issues such as depression, anxiety, trauma and paranoia. Due to the facts that their parents micromanaged each aspect of their lives and forced them to ‘fit in a box’ that they felt was appropriate or beneficial to them. It has been observed that the depression roots from not being able to choose a life path that is most aligned to their individuality affecting how they earn their livelihood, connect with others in the society and perceive themselves. They might have been forced to choose a field of study they were not interested in, marry a person they did not like in example. The yelling, the punishments, the cold nature of the parents cause lifelong trauma in the affected individuals. They live under a constant fear of upsetting the others and struggle to say “no”. Their outlook on life tends to be pessimistic which leads to anxiety and paranoia. Most of these mental disorders get diagnosed at the later stage in life. These individuals do not reach out for professional help when they need it the most mostly because their parents or close people stigmatize and disapprove of psychiatric treatment. When they do reach out for treatment, cases of overdose on prescription medicines are often observed which might cause further damage to their nervous system and other organs.
The latter group, however, represents the individuals who either fail or refuse to meet their parents’ expectation after a certain point in time. This happens because in authoritarian parenting, there is little to no explanation of the causes of rules and punishments. Some of these affected young individuals might ‘reject’ their parents and leave home while others choose to stay with them but become unresponsive and detached. Some of them grow up to be very aggressive and perceive law and adversity as ‘threats’ similar to what they have faced while growing up within the home environment. Although this group has the exact same set of trauma emerging from faulty parenthood, they process it differently. One of the coping mechanisms involves use of alcohol and drugs. Since, their sense of self is deeply wounded by the conditioning, they try gaining confidence, power and a sense of accomplishment through disregarding law or bringing harm to other people, often unconsciously. Apart from using substances, they may also get into reckless driving, stealing or engaging in fights and risky sexual practices. It poses danger to themselves and the lives around them. Overdose and accidents are common outcomes shared by the both the groups. It has also been noticed that they choose peers who are similar to them in nature or are engaged in even more dangerous activities and habits. They do so from a place of insecurity and in an attempt to ‘protect’ themselves from what they perceive as ‘threats’- parental and authoritative figures.

5.2 Neglectful or Uninvolved Parenting- They Are Not Really ‘There’

Just as the name suggests, neglectful or uninvolved parenting refers to a family environment where one or both of the parents are not really present in the child’s life. They may or may not live under the same roof. Even when they do, the parents are usually too busy or overwhelmed by their own lives and issues. It is more common in households where both the parents are working members of the family. However, it is still possible that unemployed parents might end up not engaging in their children’s lives actively. To compensate for their absence and lack of support, they usually place little to no expectations on the children and some of them would either spoil the kids with everything that money can buy or not meet any of their needs at all. In such an environment, the children are burdened with feelings of loneliness, lack of affection and support and feel ‘unwanted’ or ‘neglected. One or both the parents may be emotionally unavailable. There are no strict rules or discipline which is deep rooted in the parents’ incapability to respond to their children’s growing needs and offer guidance. In ideal conditions, this kind of parents would avoid attending parent-teacher meetings and school events. The reason being fear of having to face the consequences of their unavailability and even unwillingness to hold themselves responsible for their children’s behaviour. These parents are often too busy with their professions, struggling with interpersonal relationships themselves, financial troubles or using substance as a coping mechanism to go about daily lives. Previous studies have indicated some of these parents were raised in a similar environment themselves and grew up with the belief that it is them versus the world and they need to provide for themselves. This results in a continuation of the same patterns in their own parent-child dynamic.

Most of the children growing up in such environment do become self-reliant because they are conditioned to think that they are on their own. Eventually their expectations from their parents decrease and through providing for themselves or being their own person, they accomplish a sense of independence and empowerment. However, they tend to become cold and detached in nature, unable to form healthy social connections. Due to the lack of parental supervision and guidance, some of them end up with poor life choices and get into unhealthy relationships repeatedly. It turns into a behavioural pattern which they simply cannot escape. In early school life, they may get bullied and choose friends who do not have their best interest at heart. Rejection from the parents and peers leads to feelings of insecurity and unworthiness. If they spend their times mostly alone at home, there is plenty of freedom for imagination. Although, these imaginations might not always lead to positive outcomes. Most of these individuals would develop a negative self-image and view on their parents. Deep down their cravings for attention and affection may lead them to negative styles of attachment. It leads to onset of psychological issues such as depression, mood swings, maladaptive daydreaming
and even antisocial behaviours. They may get targeted or exploited by their peers if they do not learn to set boundaries. As a result of these overwhelming negativity, they turn to negative coping mechanisms such as substance use. It starts with easily available substances such as tobacco, alcohol or marijuana and gradually extends to more illicit drugs when they fail to achieve intoxication or the ‘alternate states of consciousnesses’. This turns into addiction rather quickly and change the normal functioning of their growing minds. Affected individuals with maladaptive daydreaming disorders might start attempting to achieve an alternate state of mind where the reality is less disheartening and as their tolerance increases with each use, the desire to maintain the same level of intoxication might lead to accidental overdose.

Similar to the latter group discussed in the authoritarian parenting, these individuals are prone to engaging in highly risky behaviour which is dangerous for them and all the people in their surroundings. It is observed that most of them have a tendency to get attached to emotionally unavailable partners since their unconscious never really stops looking for that absent parental figure. Some of these relationships turn out to be downright abusive but they usually do not possess the necessary skills to come out of it. On top that, there is a fear of loss and separation anxiety that cloud up their rational thinking process. Slightest display of affection and care in the beginning of these relationships is enough to keep them hooked. Since they grew up with a belief that they are not good enough, they convince themselves to stay in these unhealthy relationships. This pessimistic outlook on self, life and relationships act as a fuel to their existing substance use disorder and push them further into darkness. For them, this vicious cycle never seems to end and their mind tricks them into thinking that ‘this nightmare’ is their comfort zone.

5.3 Emergence of Socio-interpersonal Incompetence

The mechanism of authoritarian and neglectful parenting further extends to the affected individuals’ social and interpersonal competence. The direct link between this element and substance use disorder in young adults will now be discussed side-by-side below to understand how each of these parenting styles shape these individuals.

Table 1: Illustrating the characteristics of Authoritarian Parenting and Neglectful Parenting

<table>
<thead>
<tr>
<th>S.NO</th>
<th>Authoritarian Parenting</th>
<th>Neglectful/Uninvolved Parenting</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>High parental expectations lead to fear of failure</td>
<td>Little to no parental expectations lead to lack of care for failure</td>
</tr>
<tr>
<td>2</td>
<td>Usually good performance in academics and low dropout rate due to parental pressure</td>
<td>Poor performance in academics and high dropout rate due to lack of parental support</td>
</tr>
<tr>
<td>3</td>
<td>High regard for social acceptance</td>
<td>Disregard for social norms</td>
</tr>
<tr>
<td>4</td>
<td>Tendency to follow religious practices blindly</td>
<td>Disbelief in religion</td>
</tr>
<tr>
<td>5</td>
<td>Low rate of disobeying rules</td>
<td>High rate of disobeying rules</td>
</tr>
<tr>
<td>6</td>
<td>Overly dependent upon elders to make their decisions for them</td>
<td>Indecision or decisions strictly made on impulses</td>
</tr>
<tr>
<td>7</td>
<td>Suppression of emotions due to negative feedback and punishments experienced earlier</td>
<td>Unconventional ways of expressing emotions, attention seeking tendencies then eventually aloofness and withdrawal due to the consequences of expression</td>
</tr>
<tr>
<td>8</td>
<td>Mostly a lack of empathy towards other individuals due to emotional unavailability acquired from parental behavioural patterns</td>
<td>Mostly a lack of empathy towards other individuals due to emotional unavailability acquired from parental behavioural patterns</td>
</tr>
<tr>
<td>9</td>
<td>Constant efforts in maintaining positive social standing, being good at everything, keeping calm at the cost of losing own sanity</td>
<td>Usually not in a position to develop positive social reputation. May try picking up hobbies and be actually good at it but loses interest rather quickly</td>
</tr>
<tr>
<td>10</td>
<td>Looks for qualities in partners that would be accepted by the parents whether they like it themselves or not</td>
<td>Looks for qualities in partners that resembles parental qualities (unconsciously) or the exact opposite. Parental acceptance is not a criteria for selection</td>
</tr>
<tr>
<td>11</td>
<td>Initially works hard to satisfy parents and act according to expectation but eventually gives up into self-doubt due to lack of warmth and positive feedback.</td>
<td>Puts efforts into grabbing the parents' attention through either positive or negative acts. Eventually engages in delinquency on purpose to 'punish' the parents. Perceives 'unworthiness' as a characteristic feature.</td>
</tr>
<tr>
<td>12</td>
<td>Stays in dissatisfactory relationships due to fear of 'punishment'</td>
<td>Accepts 'punishment' out of fear of losing the partner and feeling 'rejected' again</td>
</tr>
<tr>
<td>13</td>
<td>Fear of authoritative figures</td>
<td>Rebellion against authoritative figures</td>
</tr>
<tr>
<td>14</td>
<td>Struggle to set up boundaries with others because they grew up with overly controlling parents and had no personal space</td>
<td>Struggle to set up boundaries because the concept of boundaries is not well-developed (lack of parental supervision in early life) and fear of losing connection and becoming lonely again</td>
</tr>
</tbody>
</table>
Parents choose profession, hobbies and ‘good company’ not on the basis of interest or aptitude of the child but what benefits them and boost their social standing. Parents do not really engage in guiding what career path, hobbies or social connection/relationships to pursue. Lack of knowledge and parental wisdom may lead to poor life choices.

Development of negative self-image and views on parental figures Development of negative self-image, view on parental figures and society

Onset of psychological disorders such as anxiety, depression, paranoia due to overwhelming feelings of unworthiness and trauma Onset of psychological disorders such as anxiety, depression, mood disorders due to overwhelming feelings of unworthiness and trauma

Stigma around mental health passed on by the parents Concept of mental health is not clear or are conditioned to think it is a way of life because one or both parents were struggling with it

Substance use as a coping mechanism usually starting with abusing prescription drugs to ease out physical or emotional discomfort. Substance use as a coping mechanism usually starting with alcohol, marijuana, etc then extending to other illicit drugs. Perceived as self-exploration or ‘altered state of consciousness’.

High possibility of accidental overdose and death Professional help is usually availed upon suggestion or pressure from peers or younger generation

Emergence of suicidal thoughts and actual attempts Emergence of suicidal thoughts and actual attempts

Professional help is usually availed upon reports from parents, members of the society, law and with help of social workers

5.4 A Vicious Cycle with No Escape

Substance Use Disorder is a complex psychological condition that affects an individual on both mental and physical levels. Early onset during one’s formative years develops lifestyle and behavioural patterns that simply cannot be shrugged off. In order to overcome and cure SUDs, affected individuals need tremendous amount of mental strength and compassion towards their own selves which is already destroyed by negative parenting styles or were never developed in the first place. Authoritarian parents do not leave a lot of scope for their children to grow a backbone. On the other hand, Uninvolved parents are incapable of providing the support required to grow a backbone. It is safe to say that both of these parenting styles are sides of the same coin. While Authoritarian parenting style disables the children to equip themselves with essential life skills by controlling all the aspects of their lives, Uninvolved parenting forces the children to face the challenges that life throws at them without preparing them for the same with proper guidance and support. From a broader perspective, the transactional nature of the Authoritarian parents actually makes them ‘neglectful’ and unresponsive to their children’s needs which is almost the same as Uninvolved or Neglectful parenting style. The term ‘Vicious Cycle’ delivers the same outcomes but works in a different manner on young adults who grew up with authoritarian and neglectful parents. However, the common pattern over here is that they struggle with unsatisfactory life choices that lead them to substance use. Then the substance use causes more issues in their relationships, at work, with finances and overall well-being. So, now they have more stress to deal with and due to a lack of mental clarity on how to manage the same, they go back to abusing substances. To the people affected by SUD, this seems like a never ending cycle that keeps on repeating itself. It is a complex brain condition that simply cannot be controlled without professional, rehabilitation and therapy in majority of the cases.

6. Conclusion

Drug addiction and substance use disorders cannot be eliminated from the society by treating it as a taboo. Parents need to play active roles and take responsibility in educating their children about drugs and the ill effects thereof. The goal is not limited to eliminating the term ‘disorder’ from substance use disorders but to regulate substance use in such a way that it does not turn into a disorder. Through psychoeducation and more openness to help individuals that are at a high risk of developing SUDs, prevention is highly achievable. When the young adults are able to make informed decisions on usage of drugs, it can be a useful tool towards self-actualization and exploration of the alternate states of consciousness to gain wisdom and knowledge instead of being a negative coping mechanism which leads to inevitable damage to oneself and the society as a whole. Earlier finding have been revealed Children Food Patterns affected during the Pandemic time (Sandee, et al., 2022),
another study by Sandeep & Joshi (2021) emphasised on mental health problems. Important study by Sandeep & Yadav (2020) on anxiety and depression were the key factor in Adolescent’s emotional adjustment. In another study by Sandeep & Joshi (2020), focused on the factors that affect the mental health at the workplace. Another important study by Sandeep & Yadav (2021) which emphasised on day time sleepiness, quality of life and stress. After the extensive review it can be concluded that the parenting style is one of the key factor which influence the interpersonal competency of the people at all age. Therefore we need to train the parents for good parenting so that the interpersonal competency may be improved among the peoples. Another important factor denoted as substance use; it is also one of the imperative factors which played a great role to affect the interpersonal skills as well as the overall behaviour of the person. Therefore we need to organize the psychological awareness program for the people so that the uses of substance can be reduced. It is recommended to organise such program at the various levels so that the mental health and well being of the peoples can be improved.

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