



Study on Conflict Among Alcohol Dependents at Integrated Rehabilitation Centre for Addicts, Kajamalai, Tiruchirappalli.

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ABSTRACT	The evidence on conflict among alcohol dependents has been increasing day by day, where the conflicts may include conflict in the family, with work and with outsiders also which include a number of potential risk-factors. Every human has to deal with conflict in life. This is unavoidable, as people have competing needs and desires. This means that it will be wise for people to learn how to cope with conflict as well as learn how to avoid it. Sometimes, avoiding this type of interaction can be negative, because it means the individual is refusing to face their problems where alcohol dependents fall on this criteria the most. Problem alcohol use is an unaddressed public health issue among populations displaced by conflict. This study is descriptive in nature and tries to find out how alcohol dependents dealing conflict with others and how it makes them to take increased alcohol taking situation.
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KEYWORDS	Conflict, Alcohol dependents, conflict with others, alcohol taking situation, work-family conflict.
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INTRODUCTION

A conflict refers to a situation where there is a competition of opposing actions or incompatibles. Conflicts arise among humans because of competing desires and expectations. These conflicts may be based on real issues or, in many cases, they will be due to misunderstanding.

Causes of Conflict in Recovery

Giving up alcohol and drugs does not mean that life will be perfect afterwards. Conflict is a part of life, and there is probably no way to avoid it completely without living like a hermit.

These are some of the reasons people in recovery find themselves dealing with conflict:

An addiction to alcohol or drugs usually focuses a person on their own desires. They can carry this self-obsession with them into recovery and continue to put their own needs above everyone else's. This can make life difficult for family and friends who have their own needs. When people in recovery fail to get beyond their own self-absorption, it can lead to a great deal of conflict.

When people first become sober, they will have plenty to learn. Their previous strategies for coping with life were faulty, so they need to learn new strategies. While finding their footing, they may occasionally fall back on maladaptive coping strategies. For example, they may be prone to defensiveness, and this will bring them into conflict with other people.

For those in recovery, feeling that others are interfering in their life can lead to resentment and anger.

Addicts can be highly opinionated and may refuse to acknowledge the legitimacy of opposing views. One reason for addicts fall into addiction in the first place is that they suffer from low self-esteem. Not valuing themselves leads to a black-and-white worldview. Everything is either right or wrong. Being too opinionated in recovery is likely to get them into trouble.

Poor communication is probably the most common of all causes of unnecessary conflict. People who are recovering from an addiction may struggle with communication due to low self-esteem.

Personality clashes are another common contributor to conflict. Everyone has their own unique characteristics. Sometimes, the characteristics of one person will not mix very well with those of another. This is referred to as a personality clash. For example, if one person approaches life from a highly logical point of view, while another relies more on their emotions, the two may find themselves in routine conflict.

Friends and family may still be recovering from the damage caused by their relative in the midst of addiction. Emotions can still be raw, and it can be easy to open up old wounds.

Early recovery can be an intensely challenging time. It is sometimes described as an emotional rollercoaster. High emotions lead to conflict with others.

REVIEW OF LITERATURE

1. Jennifer M. Wolff et al (2014)

The authors made a study on "Work-family Conflict and Alcohol Use: Examination of a Moderated Mediation Model" This study embraces a tension-reduction theory of drinking, wherein alcohol use is thought to reduce the negative effects of stress. The purpose of the study was to test a moderated mediation model of the relationship between work-family conflict and alcohol use in a Chicago land community sample of 998 caregivers. The results advance the study of work-family conflict and alcohol use, and it explains the complicated relationship of work-family conflict using sophisticated statistical techniques.

2. Bayard Roberts et al., (2014)

The authors made a study on Individual and Community Level Risk-Factors for Alcohol Use Disorder among Conflict-Affected Persons in Georgia. This study is to examine patterns of alcohol use disorder among conflict-affected persons in the Republic of Georgia. (A cross-sectional survey of 3600 randomly selected internally displaced persons (IDPs) and former IDPs. Two alcohol use disorder outcomes were measured: (i) having at least hazardous alcohol use AUDIT score ≥8); (ii) episodic heavy drinking (consuming >60 grams of pure alcohol per drinking session at least once a week). Individual level demographic and socio-economic characteristics were also recorded, including mental disorders. The findings suggest potential synergies for treatment responses for alcohol use disorder and

depression among conflict-affected populations in Georgia, as well as the need for stronger alcohol control policies in Georgia.

3. Jennifer M. Wolff (et al.,)

The authors made a study on “Age Differences in the Longitudinal Relationship between Work-Family Conflict and Alcohol Use” This study showed that different directions and types of WFC have distinct effects on alcohol use over time and need to be considered separately in future studies on this topic. Finally, our results suggest that the type of caregiving a person is engaged in also may either catalyze or inhibit alcohol use. Taken together, the results indicate that many factors contribute to alcohol use when in the presence of WFC and individual differences are essential for understanding this relationship.

RESEARCH METHODOLOGY INTRODUCTION

This study is an attempt to study how the respondents Involving in conflict with others (by using various situations) which occur as a result of alcohol intake habit (Alcohol Dependence).

SIGNIFICANCE OF THIS STUDY

Through review of literature the researcher revealed that having conflict with others make the patient to be dependent on alcohol more and more Hence this present study highly focus on the various ways how people involved in those kinds of conflicts and the conflict creating situations.

TITLE OF THE STUDY

Study on conflict with others among alcohol dependents at Integrated Rehabilitation centre for addicts, Kajamalai, Tiruchirappalli.

AIM OF THE STUDY

To study conflict with others among alcohol dependents at integrated Rehabilitation centre for addicts, Kajamalai, Tiruchirappalli.

OBJECTIVES

- To find out the socio-demographic details of the respondents.
- To assess how alcohol dependents engaging in having conflict with others during various situations
- To find out the association between the dependent and independent variables.

HYPOTHESES

- There is a significant Association between social pattern of drinking and unable to express feelings in front of others.
- There is no significant Association between deterioration in standard of living and fights at home.
- There is no significant Difference between total no of family members of the respondents and their overall conflict with others.

RESEARCH DESIGN

Descriptive research design

UNIVERSE

The universe of the study belongs to Alcohol Dependence patients between the age group of 26 to 62 admitted in Integrated Rehabilitation Centre for the addicts at Kajamalai, Tiruchirappalli.

SAMPLING

This research adopted 36 respondents as samples from the universe. Sampling technique adopted by the researcher is purposive Sampling.

TOOLS FOR DATA COLLECTION

The researcher used IDTS (Inventory for drug taking situations) along with socio demography details of the patient. In which a client has used alcohol over the past one year were the samples of this study.

STATISTICAL TEST

Chi-Square Test and one way ANOVA for interpreting the data.

Socio demographic characteristics’ of respondents

	Variable	Frequency	Percentage
1.	Age		
2.	26 to 34	13	36.1
3.	35 to 43	14	38.9
4.	44 to 52	7	19.4
	53 to 62	2	5.6
5.	Living arrangement		
6.	Staying alone	1	2.8
7.	Reside in family units	28	77.8
8.	Transient arrangements	7	19.4
9.	Social pattern of drinking		
10.	Drinking only in social situations	2	5.6
11.	Drink alone when socially isolated	3	8.3
12.	Always alone drinker	31	86.11
13.	Deterioration in standard of living		
14.	Yes	24	66.6
15.	No	12	33.3
16.	Unable to express my feeling to someone		
	Rarely	7	19.4
	Sometimes	9	25
	Frequently	9	25
	Very Frequently	11	30.5

OVERALL CONFLICT WITH OTHERS

Sl No	Conflict with others	Frequency N=36	Percent
1	sometimes	7	19.44
2	frequently	20	55.56
3	Very frequently	9	25

Association between social pattern of drinking and unable to express feelings in front of others.

Sl.no	Social pattern of drinking	Unable to express feelings in front of others				Statistical inference
		Rarely (n=7)	Sometimes (n=9)	Frequently (n=9)	Very frequently (n=11)	
1	Drink only in social situations	0	1	1	0	X ² =22.222 Df=3 P <0.05 Significant
2	Drink alone when socially isolated	1	1	1	0	
3	Always alone drinker	6	7	7	11	

The above finding shows that as alone drinking increases the inability to express feelings in front of others also increase.

Association between deterioration in standard of living and fights at home

Sl.no	Deterioration in standard of living	Fights at home				Statistical inference
		Rarely (n=6)	Sometimes (n=6)	Frequently (n=7)	Very frequently (n=17)	
1	Yes	1	3	5	15	X ² =10.667 Df=2 P >0.05 Not significant
2	No	5	3	2	2	

One-way ANOVA difference between total no of family members of the respondents and their overall conflict with others

Sl.no	Overall conflict with others	Mean	S.D	SS	Df	MS	Statistical inference
1	Between Groups			2.175	2	1.087	F = 2.439 P > 0.05 Not Significant
	G1 (n=7)	3.43	.535				
	G2 (n=28)	3.50	.694				
	G3 (n=1)	2.00					
2	Within Groups			14.714	33	.446	

G1 = 1-3 / G2 = 4-6 / G3 = 7 & above

CONCLUSION

In this context and in the emerging scenario of increasing harm from alcohol, it is crucial to evolve policies and programs which would improve health of the people. This requires a greater political commitment, professional involvement, cooperation of the media and an empowered society and it will reduce the conflict arising situation among the alcohol dependents.

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