

Study Of Prevalence of Anxiety in the Families of Drug Addicts and Non-Drug Addicts of Barnala City

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Abstract

Aim: A study was conducted in Barnala city of Punjab state to understand the relationship between anxiety levels of families of drug addicts and non-drug addicts. **Method:** Sampling technique used was purposive sampling. Total of 200 subjects of families of addicts and 200 subjects of families of non addicts were included. The scale used for measuring anxiety level was generalized anxiety disorder scale. Analysis was done by SPSS version 25. Chisquare test was used for data analysis. **Results:** Results showed that the anxiety was much more in the families of drug addicts as compared to families of non-drug addicts. Among drug addict families the most affected group was their wives. **Conclusion:** There anxiety levels were more prominent in families of drug addicts as compared to families of non-drug addicts.

Keywords: Anxiety, families of drug addicts, families of non-drug addicts.

Introduction:

Anxiety disorders are the world's most common mental disorders, affecting 301 million people in 2019. Mostly women are more affected by anxiety disorders than men. (WHO, september 27,2023) . According to MedCentral anxiety disorders are most common mental health concerns in united states and it's estimated that more than 40 million adults –about 19 percent have an anxiety disorder. Approximately 7 percent of children aged 3 to 17 experience anxiety issues each year and the most people develop symptoms before age 21. Women are more likely to have anxiety disorders. Approximately 1 in 7 Indians suffer from a mental disorder. It is a disorder with a global presence. There is a steep rise in India. According to NMHS survey, 3.5% of India's population suffered from some form of stress /anxiety related disorders. Data conducted by Lancet 2017 is estimated that 197 million people had mental health disorders in India. Anxiety is present almost 44.9 million population. Prevalence of anxiety is highest in Kerala, Manipur, west Bengal, Himachal Pradesh, Andhra Pradesh. (koranne, oct 13,2023). Mental health problems affect both men and women but not in equal measure. In England, one in five adults has a common mental health condition: about 24 percent of women and 15 percent of men. Women are twice as likely to be diagnosed with anxiety as men. According to the American Psychiatric Association, in anxiety disorders there are more *intense* feelings of fear or anxiety. According to ICD-10 Anxiety can be classified as: Panic Disorder, Generalized Anxiety Disorder, mixed anxiety and depressive. It can affect our daily life by various ways like relationships: it's harder to maintain relationships for people with anxiety disorder. Constant stress, uncontrollably worried are usually the problems felt by them. They can't tolerate the changes in loved ones behaviour Almost 30% of people have this disorder in modern society. (Bazley, Jan 13,2023), driving, work. Risk factors of anxiety are: Stressful, negative life experiences or environmental factors in early childhood or adulthood, Traits like shyness or behavioral inhibition in childhood, A history of anxiety and other mental health conditions in biological relations, Physical health conditions: thyroid and heart disease, Genetics: First degree relatives (parent, siblings, children) of persons suffering from anxiety are more likely to develop mood disorders. (Edwards, 2024) **Drugs:** These are the substances which alter the normal functioning of the body especially brain and can change persons mood, behavior and perception. They are classified on the basis of origin and how they interact with brain and body. Types of substances which are used recreationally or illegally with long term damage are drugs.

Natural drugs: these are the natural drugs commonly obtained from plants, animals and other natural sources. These substances are used medicinally but are misused for recreation also. The

most common drugs derived from natural sources in India are: Cannabis, Opium, Morphine. **Semisynthetic drugs** are: cocaine, heroin. **Synthetic drugs**: Methamphetamine, Ecstasy. **Addiction** :Addiction is defined as a chronic, relapsing disorder characterized by compulsive drug seeking, continued use despite harmful consequences, and long-lasting changes in the brain.(Substance use disorder by NIDA and SAMHSA, 2020) .**Drug addict** : It refers to use of certain chemicals by person to achieve pleasurable effect on the brain (Mandel, 2023) .**Non drug addicts** : A person who is not an addict to a substance (The free dictionary by Farlex).Drug Abuse is most common these days. Every group of individuals are being knelled down to drugs. According to Australian government, the drugs are substances that affect the way the body functions when it is used. A prescribed drug is a pharmaceutical drug that legally requires medical prescription to be dispensed. Non-medical use of prescription drugs can be harmful like illegal drugs (Department of health, disability and ageing, 2025). Drug Abuse Trend: Types of drugs abused in India vary from region to region. North India: Punjab, Himachal Pradesh, and other northern states are experiencing a severe opiod crisis with heroin opium being widely abused. In South india: It is a significant concern in south india. With many individuals misusing painkillers and anti-anxiety medications are common. Urban areas: In Delhi, Mumbai, Bangalore, cocaine and amphetamine are increasingly used. In rural India, cannabis, tobacco are abused drugs. They are consumed during social gatherings and as a part of tradition. **Family**: According to **Adem Arslan (2023)** family is a social unit which existed throughout human history. It is a smallest cornerstone which includes mother, father, children. It is a social unit with economic, psychological, biological, Legal, social aspects. According to study on marriage and family in module 10, **family of orientation** is that in which a person is born. **Family of procreation** is that family which is formed after marriage. (Marriage and family Defining family). **Family bonding**: it refers to emotional ties and connections that develop among family members. These connections stem from shared experiences, communication, mutual support. Trust and understanding enhances family dynamics. It is important for social and emotional development. Strong family bonding promote sense of belonging and security among members. Research shows that family bonding reduces stress and conflicts .**How addiction affects relationships: According to Eric Patterson in 2025** social health refers to an individual's relationships and ability to maintain healthy ,rewarding connections .Social health and a healthy support system are correlated with an individual's success, self-esteem and happiness in life, Elements of successful relationships: Absence of physical, emotional ,sexual abuse .They can thrive with times of individuality and times of togetherness Honest, assertive communication based on respect Fun and rewarding Allow members to feel good about themselves. **Damage associated with addiction**: Secrecy, Trust issues, Anger and abuse, Enabling, Codependency.

Review of literature

The mental health of spouses of alcoholics faced severe stress due to domestic violence (**AR Bharati, 2021**). It was confirmed that lower functioning levels of substance dependent clients' families on all subscales of family assessment device, than in families of non-addicted individuals. (**Mohsen Hossinbor,2012**) A study by (**Munish kumar,2019**) stated that family is affected in many ways by the drug abuser. Suffering of relationships, depleted financial sources, health problems, employment problems, Increased emotional stress. When the person Consumes drugs then he stops taking responsibilities which leads to depression, stress, resentment. Domestic violence is common which cause physical and emotional stress in family. A study by **Lander et. Al. (2013)** was done to notice the impact of substance abuse disorders on families and children. Individuals with Suds have higher risk of developing Suds due to genetic and environmental factors. **Impact of parental substance abuse on children**: Attachment disorders may occur at elevated rates in children affected by alcohol due to neglect and abuse and abuse. It may affect the cognitive related deficits and social emotional

functioning that led to less resilience. Studies indicate that one third to two third child maltreatment involve some degree of substance use. Such children may have trust issues in relationships, being overly emotional in relationships, taking adult roles at a much younger age than developmentally appropriate. **Parental substance abuse and child abuse and neglect:** Parents with Suds are three times more likely to be sexually or physically abusive to their child. These children are 50% more likely to be arrested in juveniles and 40% commit violent crimes. Problems like anger issues, aggression, conduct, behavioral problems whereas children who experience neglect show depression, anxiety, poor per relations, social withdrawal. **Parental substance abuse and child social and emotional functioning:** Children in homes where parents are substance abusers take Parentified roles. This occurs when caretaker is not able to meet the needs of children. Children begin to parent themselves and younger children too much earlier than developmentally appropriate. It is called Reversal of dependence needs when the child begins to parent the parent. **Educational functioning and parental substance abuse:** Education is also affected in children of substance abuse parents' cases. Due to chaotic environment there is increase in anxiety levels causing difficulty in attention and concentration. Unstructured bedtimes and mealtimes, domestic violence, safety issues all contribute to increase in learning problems and behavioral problems for these children in school. Many parents with Suds had themselves problems with school system and avoid interacting due to anxiety and shame. **The impact of substance abuse on parents of adult children:** As children transition into adulthood they are strongly affected by their parents as their parents by them. **Dennis C Daley (2013)** studies family and social aspects of substance use disorders and treatment. Aim: substance abuse affects psychological, medical, psychiatric, medical, economic, family aspects of individual concerned.

Material and methods:

The **objective** of this study was to study the difference between the anxiety levels of family members of drug addicts and non-drug addicts. The **hypothesis** of this study was there was a significant difference between the levels of anxiety of families of drug addicts and families of non-drug addicts. Before including subjects in study, the subjects were thoroughly explained the whole procedure in vernacular language. Informed consent was taken from patients. Rapport building was done and subjects were assured of confidentiality. Case histories of these patients were noted in detail. Socio-demographic data of total 400 patients was collected like name, age, sex, registration number, occupation, qualification, marital status, address, siblings, number of children. The patients included were from the outpatient department and inpatient departments of private psychiatric and deaddiction hospitals of Barnala and from the city of Barnala. Noncooperative patients were excluded in this study. Sample of 400 subjects was collected, out of which 200 were the family members of drug addicts and 200 were the family members of non-drug addicts. The sample of drug addicts' family members were collected from hospitals of Barnala and the sample of non-drug addicts' family members were collected from the Barnala city. Sampling technique was purposive sampling. Primary data, Quantitative data, comparative cross-sectional design study was done. Statistical techniques used were chi square test.

In addicts' families 170 females and 30 males were included, most of the patients were from nuclear families and some of them were from joint families. Educational status of patients was secondary mostly. In non-addict families 170 females and 30 males were included. Most of the patients were from nuclear families and educational status was secondary mostly. The tools used were Sociodemographic data, generalized anxiety disorder-7. The data analysis was done using SPSS VERSION 25 and statistical test used was chisquare.

Results:

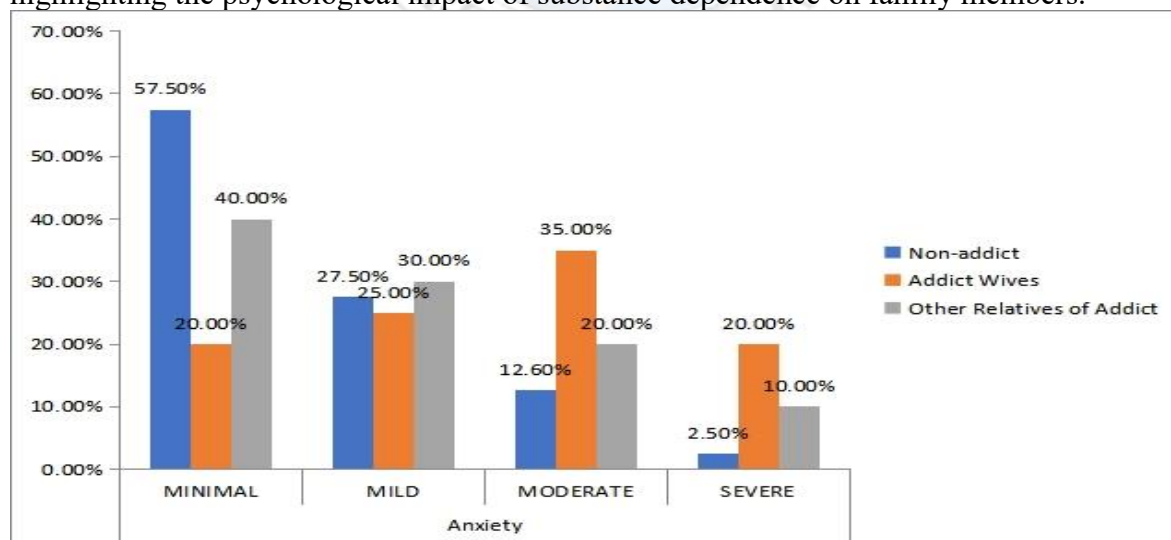
This study comprised of three group with sample size of 400. Out of 400 subjects; non-addict was 200 (50%), addict wives were 100 (25%) and other relatives of addict were 100 (25%).

Table 1: Comparison of categorization wise distribution of anxiety score among the study groups

Anxiety		Group		
		Families of non-addict	Addict Wives	Other Relatives of Addict
Minimal	N	115	20	40
	%	57.5%	20.0%	40.0%
Mild	N	55	25	30
	%	27.5%	25.0%	30.0%
Moderate	N	25	35	20
	%	12.6%	35.0%	20.0%
Severe	N	5	20	10
	%	2.5%	20.0%	10.0%
Total	N	200	100	100
	%	100.0%	100.0%	100.0%
Chi Square		60.84		
P value		<0.01*		

*: statistically significant

Table 1 presents the categorization-wise distribution of anxiety scores among three study groups: non-addicts, wives of addicts, and other relatives of addicts. Among the non-addict group, the majority of participants exhibited minimal anxiety (57.5%), followed by mild anxiety (27.5%), moderate anxiety (12.6%), and only a small proportion had severe anxiety (2.5%). This indicates that anxiety levels are generally low in individuals not exposed to addiction within the family. In contrast, among the wives of addicts, a markedly different pattern is observed. The highest proportion falls under moderate anxiety (35.0%), followed by mild anxiety (25.0%) and severe anxiety (20.0%), while only 20.0% reported minimal anxiety. This suggests a substantial psychological burden in this group, with higher levels of anxiety severity. Similarly, among other relatives of addicts, minimal anxiety (40.0%) is the most common category, but there is a notable proportion experiencing mild (30.0%), moderate (20.0%), and severe anxiety (10.0%), indicating an intermediate level of impact compared to the other two groups. The statistical analysis shows a Chi-square value of 60.84 with a p-value <0.01, which is statistically significant. This demonstrates a strong association between group category and anxiety levels. Anxiety levels are significantly higher among wives and relatives of addicts compared to non-addicts, with wives of addicts being the most affected group, highlighting the psychological impact of substance dependence on family members.



Discussion:

From the above results it is clear that anxiety level among families of drug addicts was more than the families of non-drug addicts. We can clearly see that moderate and severe anxiety was higher among families of addicts than families of non-drug addicts who mostly fall under mild (27.5%) and minimal (57.5%) category. Among the families of drug addicts 35% wives were having moderate anxiety and 20% were having severe anxiety as compared to other relatives of addicts who were having minimal anxiety (40%), mild (30%) and severe (10%) anxiety.

Above results are supported by following studies: A study by Sanju Pant, Sudha Mishra .et. Al (2022) showed that care givers of opiod dependence patients had severe anxiety and moderate depression and severe codependency. A study by Jona Olafsdottir et .al (2018) showed that 36% respondents had average serious or very serious depression, anxiety or stress. This is higher as compared to general population. So, it shows link between addiction and disruption of family psychological health. According to research paper by Nina Karlsson alcoholic patient is under the **bear goggles effect** that can make an item seem more attractive and purchase more inviting and increase the likelihood of unnecessary purchase. Work productivity decreases. Alcohol can lead to **debts**. As the money is being wasted it creates tension in families. A study by Shashikumar Ramadugu et al in 2015 concluded that alcohol use is a significant risk factor for **intimate partner violence**. A study by Annamarie Houlis in 2024 stated that addiction in the main cause of **divorce**. It disrupts communication and relationship dynamics causing marital breakdown. It leads to emotional strain, psychological strain, financial strain, domestic issues, social dynamics etc. There is also issue of custody of child in case of divorce.

David Thompson (2024) studied the impact of substance abuse on family, health and dynamics. Substance abuse, apt just affect the person but also affect the family in different ways like disrupting relationships, mental health, physical health ,emotional stress, financial struggles etc, Lack of communication and trust is common among family members. Spouses, parents, children experience stress, anxiety helplessness due to unpredictable behavior of the addict. Lack of communication leads to building up b5r3ber2s of family members within themselves which cause emotional and mental stress. Financial strain and its ripple effect: financial strain not only affects current condition also the future of the family Children is exposed to stress neglect unusual behavior might can affect their development Role of parenting is compromised due to unavailability of parent.

CONCLUSION: From the above discussion it is concluded that families of drug addicts are more prone to anxiety and depression than the families of non-drug addicts. Among the drug addicts' wives are the most affected group.

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