

A Follow-up Study: The Effects of Traumatic Life Events and PTSD Risk on Addiction Recovery Process

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Background

There are several research that indicates the relationship between traumatic life events and addiction which demonstrates a significant number of people with addiction have encountered traumatic events.

A meta-analysis study shows that people who both suffer from addiction and trauma lose their daily life functionality and they tend to have psychiatric and medical problems more than people who only suffer from addiction. Also, they seek treatment more than others. Another important finding is that people who have PTSD also have severe craving problems more than addicted patients who do not have PTSD. It is predicted that this situation has negative effects on the recovery process and it triggers off the relapse (Hildebrand, Behrendt, & Hoyer, 2015).

Method

In this study; we aimed to investigate the relationship between trauma and addiction and analyzed the recovery process of people who have both addiction and PTSD risk.

The study consists of 322 people who applied for outpatient treatment at the Green Crescent Counseling Center (YEDAM). Demographic characteristics of the sample has been indicated below in Table-1.

We used Addiction Profile Index (BAPI) to measure the severity and characteristics of addiction, Kocaeli Short Screening Scale for Psychological Trauma to define PTSD risk group and Addiction Outcome Index (BASİ) to measure the participants' recovery process in different dimensions such as severity and duration of substance/alcohol use, craving, motivation to change, psychological and physical status, working status and family relations. BASİ is a 5 point Likert scale which consists of 8 questions which people having higher scores means they have more problems with signified areas. BASİ is applied in every follow-up session.

Table 1: Demographic characteristics of the sample

Demographic Characteristics	N	%
Gender		
Female	18	5,6
Male	304	94,4
Marital Status		
Married	79	24,6
Single, seperated, divorced, widower	243	75,4
Educational Status		
Not educated / Primary school or middle school graduated	198	61,4
High school graduated / college or universtiy degree	124	38,6
Employment status		
Working (regular or irregular jobs)	124	38,5
Retired / still continue education / housewife / disabled	70	21,7
Not working	128	39,8

Findings and Discussion

21,7% of the participants have met the criteria of PTSD risk group. People who have had at least three traumatic symptoms according to the Kocaeli-SHORT are identified in the PTSD Risk Group.

In this study, we examined the 12 follow-up sessions BASİ scores and we compared the scores between individuals who have PTSD risk and those who have not.

According to that, PTSD risk group have significantly higher scores on BASİ than others when their first and second follow-up sessions (In the first follow-up session; the score of PTSD risk group is 2,19±0,69, the score of non-PTSD risk group is 1,87±0,79. In the second follow-up session; the score of the PTSD risk group is 1,93±0,77, the score of non-PTSD risk group is 1,51±0,68). However, as the sessions continue, their BASİ scores begin to decrease which means different problematic areas have begun to recover. Another important finding is that by the 10th follow-up session, the PTSD risk group have lower BASİ scores than non-PTSD risk groups which means they adapted recovery process better than non-PTSD risk group (In 10th session, score of the PTSD risk group is 0,84±0,35, score of non-PTSD risk group is 1,41±0,76). BASİ scores of all sessions have been shown below on Table-2.

Table 2: Comparison of BASİ Scores through sessions between PTSD risk group and non-PTSD risk group

	PTSD Risk Group		Non-PTSD Risk Group		P
	N	M (±SS)	N	M (±SS)	
2nd session (1st follow-up session)*	70	2,19±0,69	252	1,87±0,79	,002
3rd session (2nd follow-up session)	49	1,93±0,77	152	1,51±0,68	,000
4 th session	42	1,73±0,72	112	1,50±0,68	,079
5 th session	31	1,49±0,78	88	1,37±0,71	,442
6 th session	27	1,60±0,70	70	1,43±0,77	,333
7 th session	19	1,55±0,79	61	1,27±0,66	,138
8 th session	13	1,25±0,52	44	1,22±0,63	,842
9 th session	12	1,20±0,45	35	1,24±0,60	,870
10th session	8	0,84±0,35	28	1,41±0,76	,049
11 th session	7	0,98±0,34	22	1,19±0,59	,373
12 th session	6	0,93±0,64	15	1,17±0,45	,352

***First session as an anamnesis session is not included for BASİ score table**

Results

According to the results; addiction and trauma comorbidity can cause severe substance/alcohol use and severe psychological problems in the beginning of the treatment. However, as PTSD risk group participants continue the treatment, they get better both at severity of substance/alcohol use and psychological status more than others.

For further researches, it is suggested that to analyze effects of traumatic life events and PTSD risk on the recovery process in different dimensions such as their effects on psychological outcome or family relations and also drop-out rates.

References

- Aker, A.T., Hamzaoglu, O. & Boşgelmez, Ş. (2007). Validity of Kocaeli Short Screening Scale for Psychological Trauma (Kocaeli - SHORT). *Düşünen Adam*, 20(4), 172-178.
- Çetin Şeker, B., Dinç, M., Işık, S. ve Ögel, K. (2019). Incidence and Characteristics of Psychological Trauma in Alcohol and Substance Abuse Disorder. *Addicta: The Turkish Journal on Addictions*, 6, 315–336. <http://dx.doi.org/10.15805/addicta.2019.6.2.0046>
- Hildebrand, A., Behrendt, S. & Hoyer, J. (2015). Treatment Outcome in Substance Use Disorder Patients with and without Comorbid Posttraumatic Stress Disorder: A Systematic Review. *Psychotherapy Research*, 25(5), 565-582. <http://dx.doi.org/10.1080/10503307.2014.923125>
- Ögel, K., Evren, C., Karadağ, F. & Gürol, T. (2012). Development, Validity and Reliability Study of Addiction Profile Index (BAPI). *Turkish Journal of Psychiatry*, 23(4), 264-273.
- Şimşek, G.M., Dinç, M., Ögel, K., The Validity, and Reliability of the Addiction Outcome Index (BASİ). *Turkish Journal of Psychiatry* (in print).