Network and Personality in Recovery Success

Sarah Holditch, Ben Thompson
Dr. Rebecca Allen
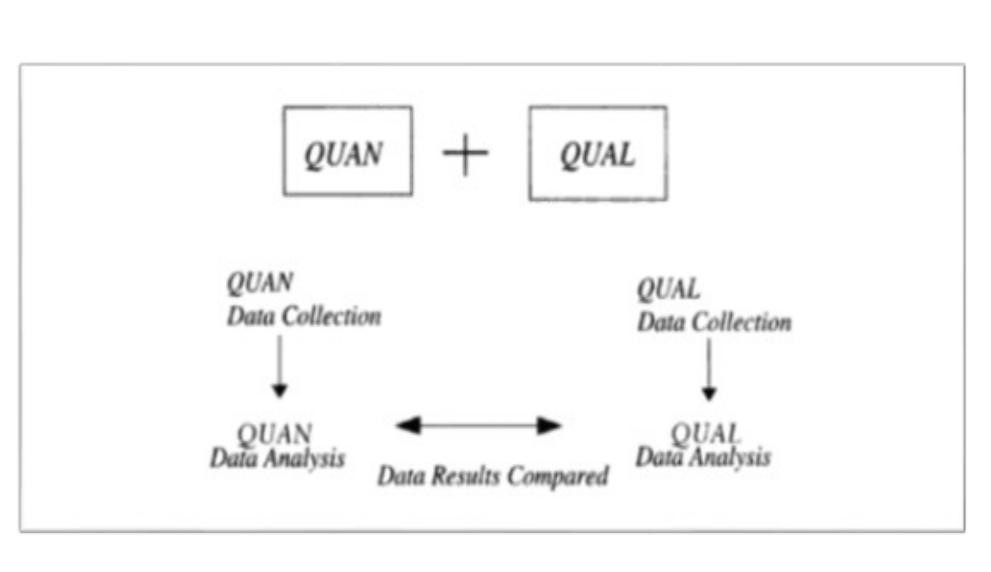### The University of Alabama

THE PHOENIX HOUSE OF TUSCALOOSA

BACKGROUND

Many people will use or try substances (drugs) in their lifetime, but only a fraction of those individuals will succumb to an addiction. One way to help combat addiction is substance programs like in-patient rehab, sober living houses, group therapy (AA nor NA), or transition homes, like Phoenix House, Tuscaloosa.

This study looked at how social support systems, personality types, and formal/informal support are related to past substance use in recovery.
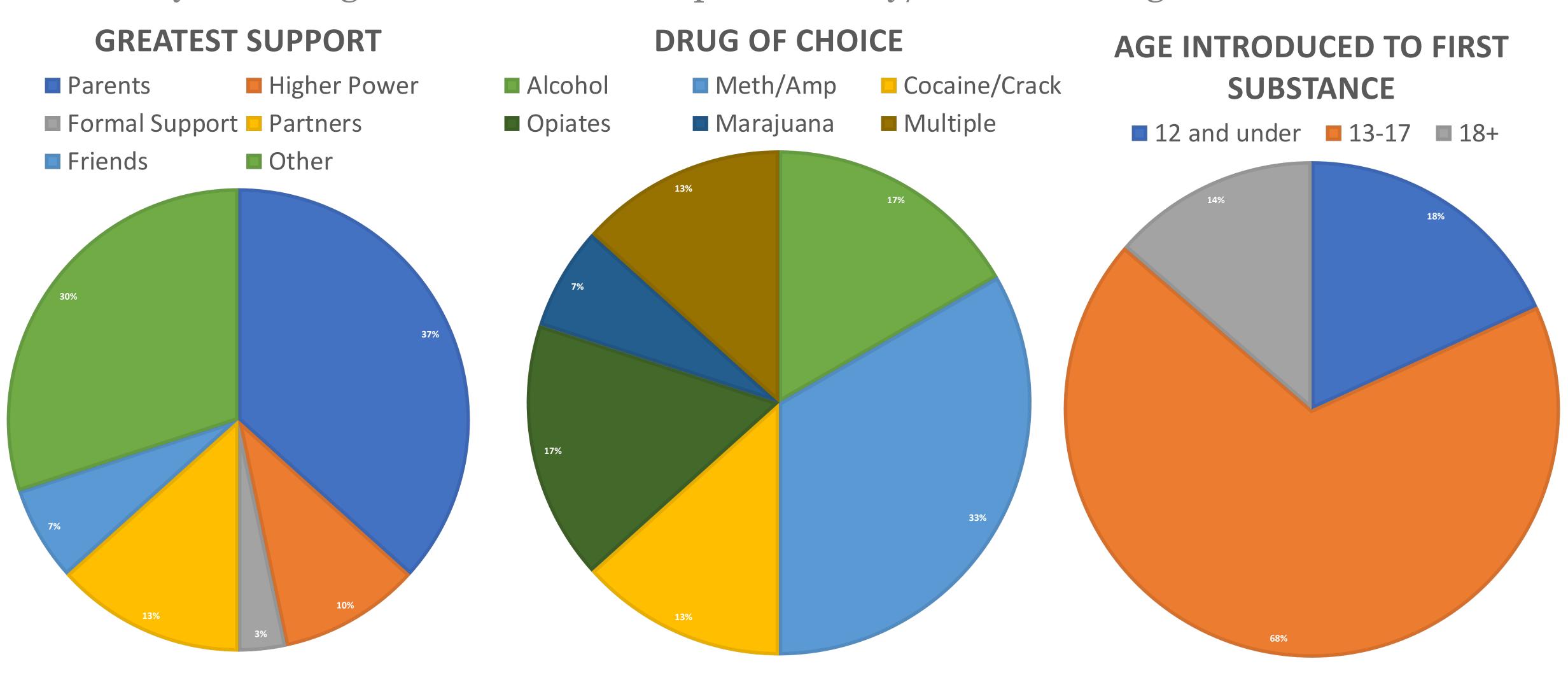
METHODS

- 30 Individuals above the age of 18. Predominantly black or white.
  - 11 Women, 19 men
- Residents were asked to take:
  - Big-5 Personality test
  - Social support survey
  - 10-25 minute Semi-structured interviews
    - Recovery journey story
    - Support systems
    - Hardships and stigma
    - Self-rated recovery

QUAN + QUAL

QUAN Data Collection   QUAL Data Collection

QUAN Data Analysis   Data Results Compared   QUAL Data Analysis

RESULTS

- There were no significant correlations associated with personality types and drug of choice
- Self-rated recovery status was not associated with either drug of choice or personality
- Total support was not associated with personality type, drug of choice, or self-rated recovery
- Extroversion was associated with reported positive support $(r=.44, p=.01)$
- Agreeableness was negatively associated with reported neutral support $(r=-.38, p=.04)$
- Conscientiousness, neuroticism, and openness are not correlated with any reported support
- The majority of participants were introduced to their substance at 'parties' hosted by parental figures or attended with their peers.
- Residents reported fathers as a source of positive support more than mothers. 55% reported no maternal presence compared to 29% reporting no paternal presence.
- Children were a strong motivator for recovery, rather than a support system
- 50% of participants mentioned legal involvement in their decision to become sober
- 73% reported drug-related stigma or discrimination. 16 out of 22 reported Systemic stigma and 6 out of 22 reported family/inner circle stigma.

Negative Motivation	Positive Motivation	Religious Motivation
"All I've ever known is substance use"	"I'm too old for this sh*t"	"He never puts more on you than you can bear"
"Now that you are doing everything you are supposed to do, all we can see you as is a junkie"	"If I could do my whole life over, I wouldn't change a thing"	"There's a lot of things that could have happened, should have happened, but never did happen. I am very blessed"
"The people who need it the most [support] don't get it at all"	"I'm looking forward. I'm not trying to go in reverse, I'm trying to go in drive"	"It has humbled me and it is making me realize I don't have to do it on my own"
"I was going through $500 worth of meth a day"	"I'm doing it for me this time"	"With the life I've lived, I should have been gone a long time ago…I thank God for Narcan"
"Everyone will tell you that I was a drug dealer but I was still a good person"	"I need to be in his life" (Referring to 3 year old child)	"Whether they discriminate me or judge me, I could care less because I don't need to impress anyone on this Earth"

GREATEST SUPPORT

Legend: Parents, Higher Power, Formal Support, Partners, Friends, Other

37% Parents, 30% Other, 13%, 10% Higher Power, 7% Friends, 3%

DRUG OF CHOICE

Legend: Alcohol, Meth/Amp, Cocaine/Crack, Opiates, Marajuana, Multiple

17%, 33%, 13%, 17%, 7%, 13%

AGE INTRODUCED TO FIRST SUBSTANCE

Legend: 12 and under, 13-17, 18+

18%, 68%, 14%

CONCLUSIONS

This study found that, in this small sample, personality was unrelated to support and recovery journey. Unexpected findings in qualitative data found the following:
- Very early age of onset
- Exposure to substances through parental figures and friends
- Severe personal and environmental hardships that spurred recovery

In conclusion, substance use is intergenerational yet families are primary sources of positive support and motivation for recovery

REFERENCES

Creswell, J. W. (2014). Research Design: Qualitative, Quantitative and Mixed Methods Approaches (4th ed.). Thousand Oaks, CA: Sage.

"Responding to the Deep South's Opioid and Substance Use Crisis (ReDO)," Funded by the Health Resources and Services Administration (2D40HP33364), Department of Health and Human Services, TDC $1,349,999, R. S. Allen, Principal Investigator.