

Research Paper

Positive Influence of 12- Weeks Group Activities on Self-Control of Middle-Aged Adults Residing in Drug and Alcohol Abuse Rehabilitation Centres, Sikkim

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ABSTRACT

Substance addiction is clearly widespread among the younger age; drugs, alcohol, and nicotine being the most typical examples. Abuse of substances can cause a range of behavior-related, psychological, and neurological issues in addition to its own harmful effects. Drug-using children are at greater risk than non-using children to suffer from mental health conditions such as depression, behavioural problems, personality disorders, suicidal thoughts, attempts at self-harm, and actual suicide. The aim of this experimental study was to determine the impact of a 12-week group activities (exercise) programme on the Self-control for Mental Wellbeing of residents in drug and alcohol abuse rehabilitation centres. The self-concept attribute of behaviour was assessed using the self-control questionnaire developed by Tangney, Baumeister, and Boone (2004). Six rehabilitation centres with a total of sixty individuals were considered for this study. Following that, two groups of 30 individuals were formed: Experimental Group (<40 years old) and Active Group (< 40 years old). Throughout a twelve-week period, participants in experimental group, who ranged in age from thirty to forty, attended three 45-minute sessions each week. The active/control groups carried out their daily activities as usual. Data analysis was done using SPSS, Version 20.0, the Statistical Package for the Social Sciences. The findings indicate that group activities significantly improved Self-Concept. The experimental group (<40) benefited more from this training programme, as evidenced by the significant differences observed during the mid-test and post-test; in contrast, the active group (aged <40) showed no significant difference between pre- and post-training. Taking part in group activities helps improve the cognitive and psychomotor skills of those in recovery from drug and alcohol addiction. Additionally, it might offer them support when they give priority to their mental health therapy.

Keywords: *Self Control, Drug, Alcohol Rehabilitation, Group Activities*

The literature provides ample evidence of the positive effects of physical activity on leading a healthy lifestyle as well as on the prevention and treatment of medical conditions. Many major health benefits are associated with physical activity

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(Mahindru, 2023). Frequent exercise creates mechanical stress and repeated exposure to gravitational forces that enhance a range of qualities, including bone mineral density, neuromusculoskeletal fitness, physical strength, endurance, and all the qualities that go into living a functional and independent life (Curcic, 2017). Through improvements in body composition, fitness, and motor skills, exercise—which is defined as planned, systematic, and repetitive physical activity—improves sports performance. Systematic reviews have shown that physical activity improves mental health outcomes. Many psychological impacts have been researched, including those on quality of life, mood, sadness, self-esteem, and cognitive performance. Overall findings indicate that exercise improves mood and self-worth while reducing stress levels, which are known to exacerbate illnesses of the mind and body. Research indicates that frequent exercisers have happier moods (Ghosh, 2012; Peluso, 2005; Biddle, 2016).

Group activity, or GA, is widely acknowledged to be essential for both the prevention and treatment of mental health disorders, such as depression and anxiety, as well as for promoting mental health outcomes, such as wellbeing (Peluso, 2005), enhanced brain function and memory (Sharma, 2006), better sleep (Marques, 2016), and enhanced mental and cognitive function (Teychenne, 2020). Benefits of physical activity have been identified as one of the many factors affecting a person's mental health (Li, 2020). Participating in group activities is often recommended as a way to manage these problems and preserve mental health.

When teenagers/adults are struggling with emotional problems, they often turn to alcohol or drug use to help them manage painful or difficult feelings. In this, they are not different from others. But because of the results of “self-medication” can be more immediately problematic. Substance abuse, encompassing the improper use of drugs, alcohol, and nicotine, is one of the world's largest public health challenges. Many detrimental problems and outcomes, such as symptoms pertaining to behaviour, psychology, and cognition, are brought on by substance misuse. It's clear that substance misuse is a problem among younger people. Drug addiction is described as a chronically relapsing disorder characterised by obsessive use of addictive substances despite the consequences to the person and society (Uhl, 2008; Koob, 2010). In the short term, substance use can help alleviate unwanted mental health symptoms like hopelessness, anxiety, irritability, and negative thoughts. But in the longer term, it exacerbates them and often ends in abuse or dependence (Miller, 2023).

According to social psychologists, how we perceive people in social situations—or how we generate impressions of them—is greatly influenced by our sense of self. One significant psychological factor that affects people's personalities is their self-control. Self-control is a hot topic across disciplines. As such, consensus on defining self-control is critical for advancing both scientific progress as well as societal impact of research findings. (Showers, 2015; Gasa, 2019). Self-control is referred to by many different names, such as effortful control, willpower, executive control, time preference, self-discipline, self-regulation, and ego strength (Moffitt, 2011). It is undeniable that behaviour and wellbeing depend on having self-control. Numerous research has demonstrated that early levels of self-control can predict later-life outcomes such as health and well-being (Moffitt et al., 2011) and cognitive and self-regulatory skills in adolescence (Shoda et al., 1990). Additionally, studies have shown a correlation between self-control and improved academic performance (Tangney et al., 2004; Duckworth and Seligman, 2005), higher calibre interpersonal connections (Vohs et al., 2011), and generally happier lives (Cheung et al., 2014; Hofmann et al., 2014). On the

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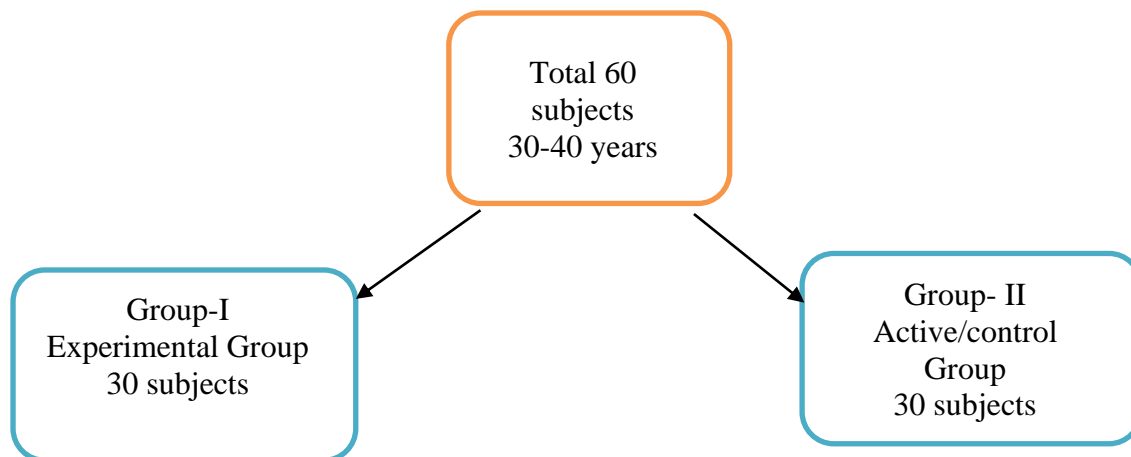
other hand, a tendency towards poor self-control is linked to negative outcomes and behaviours such procrastination, unhealthy eating habits, impulse shopping, and financial debt (Baumeister, 2002; Gathergood, 2012). Numerous studies conducted in India have concentrated on the psychological elements that influence personality change, such as motivation, resilience, and self-concept (Singh, 2022, 2023; Garcia-Martinez, 2022). However, self-control was long overlooked in psychology and education but is now recognised as being crucial to personality development. The study has goal in mind to investigate benefits of 12-week group activities on the self-control domain of mental wellbeing/ personality development of those residing in drug and alcohol rehabilitation centres.

METHODOLOGY

This experimental study set out to investigate the impact of physical group activities on middle-aged persons' psychological attributes related to their self-control while they were residing in rehabilitation centres in the Indian state of Sikkim. For this study, six rehabilitation facilities housing sixty people in total were taken into consideration. After that, two groups of thirty people each were established: the Experimental Group-I (aged thirty to forty) and the Active Group-II (aged thirty to forty). For a period of twelve weeks, participants in the experimental group-I, who were between the ages of thirty and forty, attended three sessions of forty minutes each. The individuals in the control/active group-II, whose ages ranged from thirty to forty, respectively, carried on with their usual routines.

Self-control: (Tangney, Baumeister, & Boone, 2004) A short thirteen-item scale was used to measure self-control. A Likert scale with 5 being very much like me and 1 being not at all like me was used to score their overall tendency towards self-control. The 13 items were totaled and the reverse-scored 9 items were used to determine the overall self-control score. The better the score, the greater the individual's self-control.

Picture 1. Pictorial Selection of Subjects



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Table 1. shows 12-Weeks Group Activity Program

S. No.	Game/Activity	Exp. Group I (Days)	Exp. Group II (Days)	Warm-up	Main activity	Cool down
1	Green light- Red light/Mindfulness	Monday	Tuesday	10 min	25 min	10 min
2	Aerobics/Zumba	Wednesday	Thursday	10 min	25 min	10 min
3	Jenga / Simon says/Guided Meditation	Friday	Saturday	10 min	25 min	10 min

RESULTS

As to fulfil the study’s objectives, the researcher used IBM Statistical Package for the Social Sciences (SPSS) software (version 20.0.0) to analyse the data with Repeated Measure ANOVA Test. Pre-test, Mid Test and Post-test Group Design. The analyses were done using two groups (experimental and control/active), $p = 0.05$ was chosen as the statistical significance level.

Descriptive Statistics (Mean ± Standard Deviation) of Self-control for all the subjects of different groups.

	Subject	Mean	Std. Deviation	Std. Error
Exp_Group_I Pre	30	2.3300	.52335	.09555
Exp_Group_1 During	30	2.3500	.50498	.09220
Exp_Group_1 Post	30	2.8667	.62551	.11420
Cont_Group_I Pre	30	2.3300	.66184	.12084
Cont_Group_1 During	30	2.3833	.65130	.11891
Cont_Group_1 Post	30	2.4000	.55647	.10160

Table 3. ANOVA table between various groups of Self-control variable

		Sum of Squares	df	Mean Square	F	Sig.
Exp_Grp I	Between Groups	5.554	2	2.777	9.053	.000
	Within Groups	26.685	87	.307		
	Total	32.238	89			
Contrl_Group_I	Between Groups	.080	2	.040	.103	.903
	Within Groups	33.985	87	.391		
	Total	34.065	89			

Table 3 indicates since the level of significance is .000 which is < 0.05 it is seen that there is a significant difference in scores between various groups of Self-control variable among age group of 30 to 40 years of the Experimental Group. Table indicates since the level of significance is .903 which is > 0.05 it is seen that there is no significant difference in scores between various groups of Self-control variable among age group of 30 to 40 years of the Control Group.

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Table 4. Multiple Comparisons of Dependent Variable Self-control

Groups	(I) Test	(J) Test	Mean Difference (I-J)	Std. Error	Sig.	95% Interval	Confidence
Exp_Grp I	Pre	During	-.02000	.14300	.989	-.3610	.3210
		Post	-.53667*	.14300	.001	-.8776	-.1957
	During	Pre	.02000	.14300	.989	-.3210	.3610
		Post	-.51667*	.14300	.001	-.8576	-.1757
	Post	Pre	.53667*	.14300	.001	.1957	.8776
		During	.51667*	.14300	.001	.1757	.8576

*. The mean difference is significant at the 0.05 level.

Table 4 indicates that there is a significant difference between pre and post-training with 0.001 as the level of significance, while it is seen that there no a significant effect between pre and during training till the 6th week (during) on the self-control variable in the Experimental Group among age group of 30 to 40 years. Table indicates that there is a significant difference between during and post training with 0.001 as the level of significance, while it is seen that there is no significant effect of the intervention till the 6th week (during) the training on the self-control variable in the Experimental Group among age group of 30 to 40 years.

DISCUSSION

The main goal of the current study was to see is a 12-week programme of group activities have a positive impact on the self-control of the people who live in drug and alcohol rehabilitation centres. After 12 weeks of group activities training, it was evident that experimental groups I benefited from it. The results reveal that experimental group-I (aged 30 to 40 years), where significant differences were seen after 6 weeks of intervention, benefited more from it than active/control group-II (aged 30 to 40 years)), where there was no such significant difference observed after 6 weeks and 12 weeks of intervention. This is may be due to Intraindividual differences in the self-control exist due to different dynamic motivational forces within people.

Subsequent studies on easy self-control techniques have revealed that strong self-control individuals use their ability to create circumstances for themselves that align with their long-term objectives. Prior to The connection between exercise and mental health has been the subject of several research. In 2018, Rasaily et al. conducted research on the state of substance use disorders in Sikkim at the time. In order to develop a variety of strategies for the establishment of services for substance use disorders in the State within the framework of the current health care system, it sought to assess the prevalence of alcohol and other drug use in Sikkim, compare it to the national situation, and summarise government efforts related to control and prevention and the current health care system.

Earlier research (Beasley and Garn, 2013; Liu et al., 2015) has demonstrated the significant positive impact of Group Activities, or GA, on self-control, with no discernible sex differences (Reddon et al., 2017). The impact of GA was not direct; rather, it came through the physical self-concept, one of the dimensions of self-control (Sonstroem, 1997). Prior research discovered a direct correlation between PA and self-control, but did not incorporate physical self-control into the model (Sani et al., 2016). Linke (2014) looked into the effectiveness, philosophy, and evidence of exercise-based treatments for drug use disorders. More evidence suggests that individuals with substance use disorders (SUDs) may enjoy

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exercising, and that engaging in regular exercise may aid in their recovery from SUDs as well as enhance their general health and level of fitness (Fernández-Bustos, 2019). Engaging in physical group activities can benefit individuals who abuse illegal drugs and alcohol more than those who abuse nicotine. For example, physical activities can reduce depression symptoms in the former group and increase the rate of abstinence in the latter. Similar treatment results were observed in three categories: follow-up periods, activity intensity, and exercise modalities (Brown, 2013; Du, 2013 Altıntaş, 2014). Singh et al. (2022; 2023) observed that practicing yoga considerably enhanced overall wellness and mental health in a different study.

Exercise-based therapies have been shown to improve self-control. Exercising improves self-control, as demonstrated by better results on the Stroop test (Cooper, 2018). Chang (2012) claims that exercise improves self-control. Many demographics, including adults, elderly individuals, and school-age children, have all shown this effect (Barella, 2010; Sibley, 2018). Higher intensity exercise has more delayed benefits, with effects seen up to an hour after exercise, while moderate intensity exercise may improve self-control immediately after exercise, according to some data (Chang, 2012). The strength paradigm of self-control (Baumeister, 2007) could account for these outcomes. Group-based activities training programmes could be used in future research on the personalities, motor skills, and cognitive functioning of drug and alcohol addicts. It is essential to do repeat studies and find volunteers from a larger variety of ages in order to generalise the study's findings. Furthermore, because the exercise approach in this study involved physical group activities, it was not able to recommend an efficient strategy for enhancing the physical self-control in terms of exercise frequency, intensity, or modalities.

CONCLUSION

Self-control enable people to navigate and adapt to situations, help them define themselves through certain roles, and concentrate their attention on the context at hand. Exercise-based treatments for SUDs include mind-body workouts and moderate-to high-intensity aerobic activities. These treatments support a number of theoretical and practical factors, including psychological, behavioural, and neurobiological aspects. They also uphold positive self-views and evaluate the alignment between one's self-beliefs and behaviours for individuals with SUD.

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Conflict of Interest

The author(s) declared no conflict of interest.

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