

VOJNOSANITETSKI PREGLED

VOJNOMEDICINSKA AKADEMIJA

Crnotravska 17, 11 000 Beograd, Srbija

Tel/faks: +381 11 2669689 vsp@vma.mod.gov.rs

ACCEPTED MANUSCRIPT

Accepted manuscripts are the articles in press that have been peer reviewed and accepted for publication by the Editorial Board of the *Vojnosanitetski Pregled*. They have not yet been copy edited and/or formatted in the publication house style, and the text could still be changed before final publication.

Although accepted manuscripts do not yet have all bibliographic details available, they can already be cited using the year of online publication and the DOI, as follows: article title, the author(s), publication (year), the DOI.

Please cite this article: SOCIAL SUPPORT IN RECOVERY FORMER USERS OF PSYCHOACTIVE SUBSTANCES IN MONTENEGRO: A SURVEY STUDY

Naslov na srpskom

Authors **MSci Ena Grbović 1 PhD, MD, Boban Mugoša 2** Vojnosanitetski pregled (2018); Online First June, 2018.

UDC:

DOI: https://doi.org/10.2298/VSP180409104G

When the final article is assigned to volumes/issues of the Journal, the Article in Press version will be removed and the final version appear in the associated published volumes/issues of the Journal. The date the article was made available online first will be carried over.

SOCIAL SUPPORT IN RECOVERY FORMER USERS OF PSYCHOACTIVE SUBSTANCES IN MONTENEGRO: A SURVEY STUDY

MSci Ena Grbović 1 PhD, MD, Boban Mugoša 2

- Social worker, Institute for public health of Montenegro, PhD student University of Montenegro
- $^{\scriptscriptstyle 2}$ Professor at Medical faculty University of Montenegro , Director of Institute for public health of Montenegro

E-mail: ena_grbovic@ijzcg.me

ABSTRACT

Introduction: Social support can be a very powerful and beneficial force in the recovery process.

Aim: Research of social support as an important component in the process of resocialization of former users of psychoactive substances, so far, has been neglected in Montenegro. However, one of the conditions for quality analysis whose outcome would involve examining of deeper causal relationships is examining of social support structure of the respondents. That is why the main goal of paper is to determine precisely dimension of social support, and its factorability. A special sub-aim is to identify latent structure of emotional support as specific dimension within the social support scale.

Methods: The survey was conducted with 107 clients treated in the Public Institution for accommodation, rehabilitation and resocialization of users of psychoactive substances Podgorica (Montenegro) from May 2014 to October 2016. Multidimensional Social Support Scale (MSPSS) is used, which consists of 12 variables that measure three components of support: family, friends and significant others. The analysis of the main components with direct oblimin rotation was used to examine the factorability of MSPSS. After factor analysis is conducted, the reliability of the determined scale was tested by Cronbach alpha coefficient through discriminatory validity.

Results: All three components show statistically significant results (p <.05). The correlation between Friends and Significant Other is .510, while between Significant Other and Family it scored .617. On the other hand, the correlation between Significant Other and Family is .525. as we have assumed and as previous results in this area suggest there is a significant link between the Friends and Family components. 85.1% of the respondents stated that social support is important (or extremely important) in process of rehabilitation and resocialization.

Conclusion: Survey emphasize the important role of the family in the life of the respondents is observed. Social support has many benefits and it is often crucial to establishing successful recovery former users of psychoactive substances.

Key words: social support, recovery, former users of psychoactive substances, the Multidimensional scale of perceived social support (MSPSS)

Socijalna podrška u periodu oporavka bivšim korisnicima psihoaktivnih supstanci u Crnoj Gori: Istraživačka studija

Abstrakt

Uvod. Socijalna podrška ima veoma značajnu ulogu u procesu oporavka bivših zavisnika psihoaktivnih supstanci. **Cilj.** Istraživanje socijalne podrške kao važne komponente u procesu resocijalizacije bivših korisnika psihoaktivnih supstanci, do sada, bilo je zanemareno u Crnoj Gori. Međutim, jedan od uslova za kvalitetnu analizu čiji ishod uključuje ispitivanje dubljih uzročnih odnosa je ispitivanje strukture socijalne podrške ispitanika. Zbog toga je glavni cilj rada da precizno odredi dimenziju socijalne podrške i njenu faktorsku vrijednost. Poseban pod-cilj je identifikacija latentne strukture

emocionalne podrške kao specifične dimenzije unutar skale socijalne podrške. Metode: Istraživanje je sprovedeno kod 107 klijenata, lečenih u Javnoj ustanovi za smještaj, rehabilitaciju i resocijalizaciju korisnika psihoaktivnih supstanci Podgorica (Crna Gora) u periodu od maja 2014. godine do 1. oktobra 2016. godine. U istraživanju je korištena Multidimenzionalna skala socijalne podrške (MSPSS) koja se sastoji od 12 varijabli koje mjere tri komponente podrške: porodice, prijatelja i značajnih drugih. Analiza glavnih komponenti sa direktnom oblimin rotacijom (direct oblimin rotation) korišćena je za ispitivanje faktorabilnosti MSPSS-a. Nakon sprovedene faktorske analize, pouzdanost skale je testirana pomoću koeficijenta alfa Cronbacha (Cronbach alpha coefficient) kroz diskriminatornu validnost. Rezultati. Sve tri komponente pokazuju statistički značajne razlike (p <0,05). Korelacija između Prijatelja i Značajnih drugih je .510, dok je između značajnih drugih i porodice .617. S druge strane, korelacija između značajnih drugih i porodice je .525. što ukazuje da postoji značajna veza između komponenti prijatelja i porodice. Takođe 85.1% ispitanika navelo je da im je socijalna podrška važna (ili izuzetno važna) u procehu rehabilitacije i resocijalizacije. **Zaključak.** Istraživanje naglašava važnu ulogu porodice u životu ispitanika. Socijalna podrška ima puno prednosti i često je od ključnog značaja za uspješni oporavak bivših korisnika psihoaktivnih supstanci.

Ključne reči: socijalna podrška, oporavak, nekadašnji korisnici psihoaktivnih supstanci, Multidimenzionalna skala socijalne podrške (MSPSS)

Introduction

Dependence on psychoactive substances is considered to be physical, mental, social and spiritual illness (1). In the last 40 years, a growing trend of number of addicts has been recorded worldwide (2). Relapse is one of the most important topics in the recovery period (3). It is therefore of utmost importance to determine which factors influence on the prevention of relapse.

Social support is determinant of addiction and due to its multidimensionality it can be defined from different perspectives and operationalized in different ways (4). The sources of social support are numerous and quite diverse, including family, friends, partners, community and associates (5).

Cohen and Wills mention several types of social support. Informational support is important for understanding and dealing with problems, and in literature it is also called counseling and assessment support. Self-esteem support is a person's information that he/she is accepted and respected. By communicating with people who accept and respect him/her, regardless of his or her difficulties or failures, a person develops self-esteem and this type of support is called emotional or close support. The need of each individual for belongingness is met through social companionship in leisure activities, while instrumental support is the one that provides for material support. Empirical research shows high correlations of various social support functions (6). Family is a dominant source of sociability and social support (7-10). Close relatives are more often a source of emotional and instrumental support, while friends are more important for socializing (11-12). Instrumental support is often provided by neighbors (13, 10). Social relationships are assessed by frequency of social interactions (14) and analyzed through three spheres. The primary sphere implies the closest family relationships; secondary relates to friends,

relatives and a closer social community while tertiary relates to participation in organized activities and associations (15). Böhnke warns of the importance of family cohesiveness, intergenerational solidarity and friendships (16). In their study, Spot and Redmond (17) dealt with the role of social support in the period of treatment and prevention of relapse. The authors suggest that the existence of supporting structures and networks plays a significant role during the drug treatment process in people who abuse drugs and in preventing relapse while contributing to the improvement of mental health.

Although the problem of the use of psychoactive substances is a widespread phenomenon, post-rehabilitation and resocialization social support did not find its place in scientific research in Montenegro. This problem can be also seen as a global one. Every adequately conscious society should be interested in providing social support to clients after rehabilitation and resocialization.

Aim

Research of social support as an important component in the process of resocialization of former users of psychoactive substances, so far, has been neglected in Montenegro. However, one of the conditions for quality analysis whose outcome would involve examining of deeper causal relationships is examining of social support structure of the respondents. That is why the main goal of paper is to determine precisely dimension of social support, and its factorablity. A special sub-aim is to identify latent structure of emotional support as specific dimension within the social support scale.

Method

The survey covered 107 clients, former users of psychoactive substances and former residents of the Public Institution for Accommodation, Rehabilitation and Resocialization of Users of Psychoactive Substances in Podgorica. The sample included respondents who completed one-year rehabilitation and resocialization period. The survey was conducted byface-to-face method with the prior approval of the institution in which the survey was conducted as well as the voluntary consent of the respondents. The total sample covers 42.8% of the total number of clients of the institution for the survey period.

Multidimensional Scale of Perceived Social Support (MSPSS) was used for this survey (18). The scale consists of 12 items indicating dimensionality (factor validity) expressed through three components: family, friends, and significant other. Answers in the Likert scale are ranked from 1 to 7 (1, I strongly disagree- 7, I strongly agree). One of the goals was to validate this scale on our sample. By examining the internal compliance of the data, it was found that the results obtained by analysis coincided with the original results of the author of this scale. The analysis of the main components with direct oblimin rotation (19) was used to examine the factorability of MSPSS. After factor analysis is conducted, the reliability of the determined scale will be tested by Cronbach alpha coefficient through discriminatory validity.

Results

Some of the key socio-demographic characteristics of respondents imply that majority of them completed secondary school (70.1%), their average income amount is to 720 Euros (distribution of data indicates asymmetry and presence of below-average values; skeweness = 1.598) The largest number of them was raised in a complete family (81.3%) (Table 1).

Table 1. Descriptive statistics (education, income type of family, marriage status of parents, number of family members)

Variable		Skewness	Kurtosis
Education (multiply responses)			\wedge
Elementary school N(%)	21 (19.6%)		
Middle school N(%)	75 (70.1%)		
Faculty N(%)	11 (10.3%)		
Type of family? (multiply respon	uses)		
Complete N(%)	87 (81.3%)		
Single parents N(%)	9 (8.4%)		
Expanded family N(%)	8 (7.5%)		
Other N(%)	3 (2.8%)		
Marriage status of parents?			
Marriage N(%)	54 (50.5%)) /	
A marital union N(%)	1 (.9%)		
Divorced N(%)	12 (11.2%)		
One parent died N(%)	36 (33.6%)		
Missing values N(%)	4 (3.7%)		
Total family members X±SD	4.09±1.24	0.028	-0.521
Income X±SD	720.70±461.38	1.598	2.960

Most of the clients stated that they had close and than, very close relationships with mother and father, and the smallest percentage were at a great distance with mother and father. Respondents described their relationship with their partners as very close or close to 33.65%, while 9.4% of the respondents had a distant and mostly sympathetic relationship with their partner. (Table 3)

Table 2: Relationship with parents

Relationship with parents (%)	With mother	With father
Very close	36.4 %	20.6 %
Close	40.2 %	30.8 %
Neither close nor distant	17.8 %	24.3 %
Distanced	4.7 %	12.1 %
Very distanced	.9 %	10.3 %

Table 3: Relationship with partners

Relationship with partners	N	%
Very close	23	21.5 %

Close	13	12.1 %
Neither close nor distant	5	4.7 %
Distanced	5	4.7 %
Very distanced	5	4.7 %

4.1. Results of the main components analysis

Analysis of the main components separated the components and determined factorability within the three components. Prior to the analysis of the main components, the adequacy of the data was determined by examining the correlation between the variables (r> .3). The value of Kaiser-Meyer-Olkin's index is .845 which exceeds the threshold of .6 with statistically significant Bartlet's test of sphericity (sig. = .00).

The analysis of the main components revealed the presence of three components with characteristic values above 1, which accounts for 54.89%, 12.53% and 10.92% variance. With regard to the structure of the components, these are entitled *Friends*, *Family*, *and Significant Other*. Looking at Table 5, one can notice the structure of the components. For example, the *Friends* component explains the variables that indicate friends as an important support and encouragement in life. On the other hand, *Significant Other* component includes variables that imply the existence of a "special person" in the life of the respondents and their significant roles. In the *Family* component the presence of variables that emphasize the important role of the family in the life of the respondents is also observed.

Table 4: Factor weight for PCA with direct oblimin rotation (Kaiser normalization) of the three-component solution

	S		
		her	
	.944	-	-
		.002	.018
I can count on my friends when things go wrong.	.923		-
		.017	.002
I have friends with whom I can share my happiness and sorrow.	.856	-	.065
		.087	
I can talk about my problems with my friends.	.764	.160	-
			.003
My friends really tryto help me.	-	.941	.066
	.072		
There is a special person who isthere always when I am in need.	.075	.865	.027
There is a special person who is a source of comfort to me.	-	.761	-
	.017		.034
There is a special person in my life with whom I can share joy and	.278	.417	.095
sorrow.			
There is a special person in my life who cares about my feelings.	-	.064	.855
	.021		
I can talk about my problems with my family.	-	-	.822
	.003	.001	
My family is willing to help m make decisions.	_	_	.780
	.014	.078	
I have the emotional help and support I need from my family.	.092	.119	.727

Kaiser - Meyer - Olkin's indicator Bartlet's sphericality test

Note: values above .3 are in bold

4.2. Internal compliance of the scale

In order to examine the internal compliance of the scale, we examined the Cronbach alpha coefficient, which was examined both for the entire score of variables that make up the synthetic variable - social support as well as for the individual synthetic variables extracted in the previous analysis. Zimet et al. (19) had previously tested these properties and determined the following: the coefficient α for all 12 variables (Social support) was .88. Family, Friends and Significant Other show coefficient α of .85, .75, and .72 respectively. In comparison, our analysis established internal compliance of Social Support of .92, while for Family, Friends and Significant Other these coefficients amounted to .89, .934, and .88.

4.3. Emotional support within the MSPSS scale

Emotional support as a sum of the two most common components, in our case Friends and Family, is an important if not the most important part of social support. By examining the correlation coefficients between the three components of MSPSS, the validity of this assumption was determined. All three components show statistically significant results (p <.05). the correlation between Friends and Significant Other is .510, while between Significant Other and Family it scored .617. On the other hand, the correlation between Significant Other and Family is .525. as we have assumed and as previous results in this area suggest there is a significant link between the Friends and Family components. Due to the lack of strong statistical evidence, for now these data represent a sufficient indicator of the accuracy of the assumptions stated in the paper.

In order to examine significance of emotional support, it is formatted synthetic sketch of variables identified in previous section as a part of emotional support. As Table 5. shows, emotional support for former users of psychoactive substances has a big importance. The distribution values range from 8 to 56. The arithmetic mean is 44.75 and the value of the skew is has negative asymmetry.

ep sum

Table 5: Descriptive statistics of Emotional Support

56.00

0.67009

113.851

-1.527

2.494

Modus

Variance

Xurtosis

Skew

std. Deviation

Data from Table 6 (after the interval variable is split and transformed into categorical) show the importance that emotional support has to clients. Very small percentage of respondents expressed that emotional support was not important, while 85.1% of respondents pointed out to the importance of this construct.

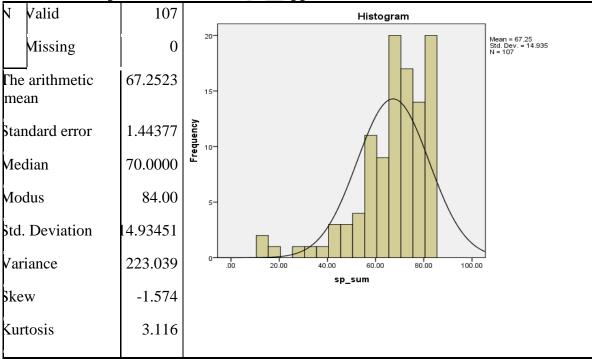
Table 6: Emotional support

Emotional support	Frequencies	%
It does not matter to me at all	4	3.7%
It's a bit important to me	4	3.7%
It is neither important nor irrelevant to m	8	7.5%
It's important	35	32.7%
It is extremely important	56	52.3%

Social support of former users of psychoactive substances

In order to determine level of social support at former users of psychoactive substances, synthetic sketch of variables, which make this construct, is formed.

Table 7: Descriptive Statistics of Social Support



In Table 7 are values for variable social support and values range from 13 to 84. The higher value on the scale implies presence of greater importance of social support. In average

values we notice some disagreement and values of arithmetic mean, medium, media, and mode significantly deviate and point to the asymmetry of the distribution. The sketch indicator, which measures distribution asymmetry, shows us that it is negative asymmetric distribution. This implies presence of above-average values.

After the variable is transformed into a material with 5 categories, it is noted importance of social support to the respondents. Cumulatively, 85.1% of the respondents stated that social support is important (or extremely important) (Table 8).

Table 8: Social support

Social support	Frequencies	%
It does not matter to me at all	3	2.8%
It's a bit important to me	3	2.8%
It is neither important nor irrelevant to me	10	9.3%
It's important	37	34.6%
It is extremely important	54	50.5%

Discussion

This aim of this paper was to identify the perception of social support of former users of psychoactive substances following their rehabilitation and resocialization in Montenegro. The results also showed that the scale has good internal and test-retest reliabilities and moderate construct validity (20).

In 2011, a survey in Vietnam showed that parents, wives, brothers and sisters gave most of emotional support families of former addicts. Respondents reported that abstinence was maintained thanks to the support of family members, and emotional support by family was emphasized for day to day functioning. Also emotional support provided by families made a significant contribution to tackling obstacles and problems they encountered and often provided strong motivation to abstain from drugs, care for their health and seek employment (21). Results are very similar with results from Montenegro where the highest percentage respondents in quoted the importance of this construct.

A research carried out in 2015 in China pointed to the importance of social support in recovery period and its significance in long rehabilitation period of addicts (22). In Montenegro, research has shown that to more than three quarters of respondents social support is important or extremely important. Family support proved to be important for the treatment process, while good relationships with other significant persons in life are a significant factor for mental health of clients, and are particularly important from the perspective of social functioning (23). For clients who are in the program for treatment of psychoactive substances abuse, family support may be the most important aspect of social support (24, 18). Clients who perceive family support as good believe to have a safe environment, adequate health and social protection, financial support, possibility to use social resources (25-26), which largely reflects on their quality of life.

The results of our research correlate with the results carried out by Shahzad, Begum and Malik (27) with clients who underwent treatment for drug addiction in rehabilitation

centers in Pakistan. Research has shown that availability of social support by the family, friends and employees in the treatment facilities helps clients to better cope with the addiction and is a significant factor in preventing relapse.

In similar research in world, the authors concluded that social and emotional support has a significant role after period of rehabilitation and resocialization. Therefore we can conclude that results from survey is reliable and that cultural differences have not affected on results of survey.

Limitations of the study

The analysis pointed to interesting factorability, but more significant research should involve research on a larger sample. This is very especially important in cases of applying multivariate statistics techniques, which is one of the prerequisites for its application. This could help to analyze the results with some other statistical technique, not just with factor analysis. This would be particularly significant for determining correlation between the components. Since all variables are part of one scale (social support), the question is how much their mutual causality affects on correlation between the components.

Benefits of the study

Taking into account the pioneering contribution of paper to understanding the current problem, especially considering the inadequate examination of the topic, by opening of this insufficiently explored issue sets the foundation for further research in this field.

Conclusion

On the basis of the conducted research, we conclude that emotional support plays an important role in the perceived social support after the period of rehabilitation and resocialization. It is recommended that social support is promoted through intervention programs in dealing with clients in the process of rehabilitation and resocialization.

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Revised on April 9, 2018. Revised on May 18, 2018. Revised on May 28, 2018. Accepted on May 29, 2018. Online First May 2018.