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Social Network Interview (SocNet) for persons with alcohol use disorders

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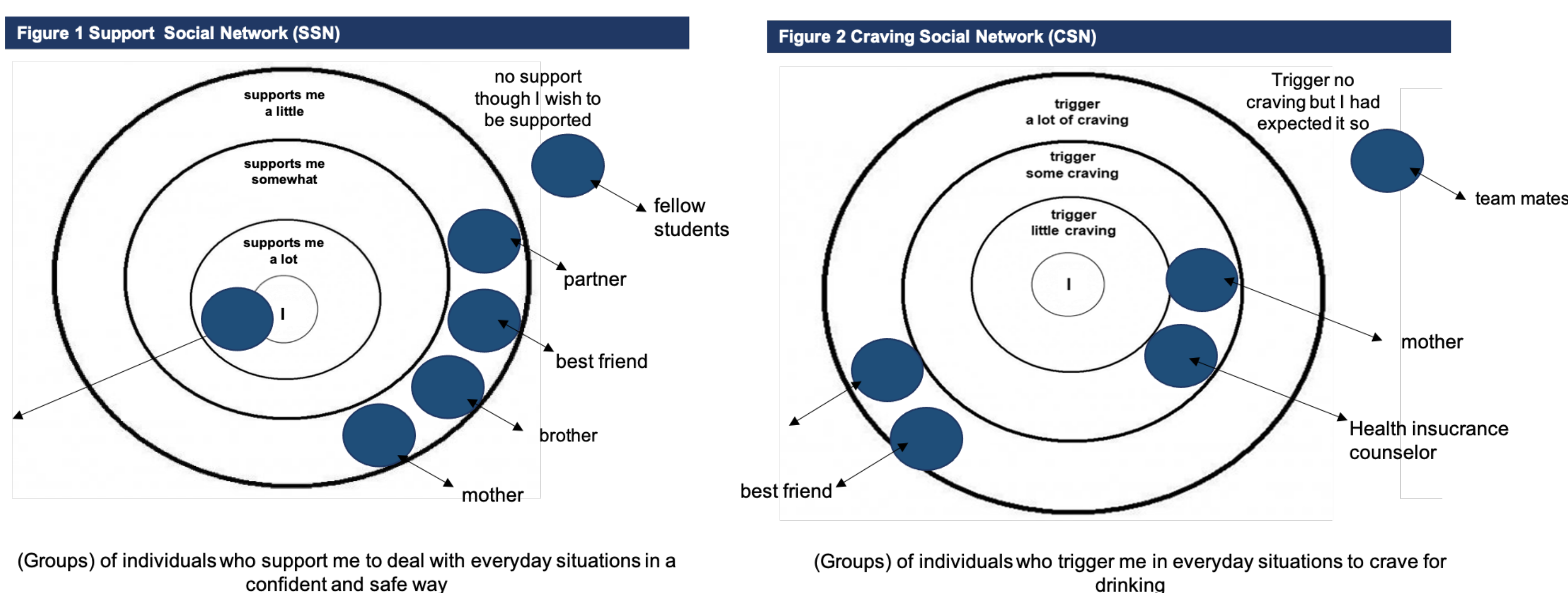$Christina\ Hunger-Schoppe^1$

Background

Larger, integrated social networks can be more easily activated to protect individuals; disjoint social networks may lack such responsiveness to health needs (Perry & Pescosolido, 2012; Pescosolido, 2015). The integration of significant others with therapy reveales a benefit for both patients and the other persons.

Objective

To transfer the instrument of the Social Network Interview (SocNet) used in a previous investigation for social anxiety disorders (Hunger, Geigges & Schweitzer, 2018) to analyze the social networks of people with alocohl use disorder (AUD). The aim is, to examine social networks, social support and social negativity from patients with alcohol use disorder (AUD).

The Social Network Interview (SocNet)

We created a disorder-specific version of the Social Network Interview (SocNet) for patients with AUD. **Social networks (SSN)** included (goups) of individual who support patients cope with everyday life situations in a confident and secure manner. **Craving Social Networks (CSN)** included (groups of) individuals who stimulated craving and/or represented situations in which the participants experienced craving when coping with everyday life situations. Patients place wooden blocks for as many (groups of) people as they perceive of importance in their social life (Figure 1, 2).

Figure 1 Support Social Network (SSN)
(Groups) of individuals who support me to deal with everyday situations in a confident and safe way

Figure 2 Craving Social Network (CSN)
(Groups) of individuals who trigger me in everyday situations to crave for drinking

Resarch Questions

RQ1: What differences can be found between craving- and support social networks (CSN, SSN) in terms of structural (i.e. size, age, composition, sustainability, frequency of contact) and functional aspects?

RQ2: What differences can be found in the characteristics within the craving- and support social networks (CSN, SSN) between persons recovered from AUD and suffering from AUD?

Measures

SSN and CSN: Hierarchical network mapping technique (Figure 1, 2).
Positive social support: 6 items: e.g. "How much do you feel being understood by [person's name]?"; Cronbach's α in SSN =.77, CSN = .92. **Social Negativity:** 6 items: e.g. „"How much do you feel that [person's name] demands to much from you?"; Cronbach's α in SSN =.76, CSN = .93.

Refrences

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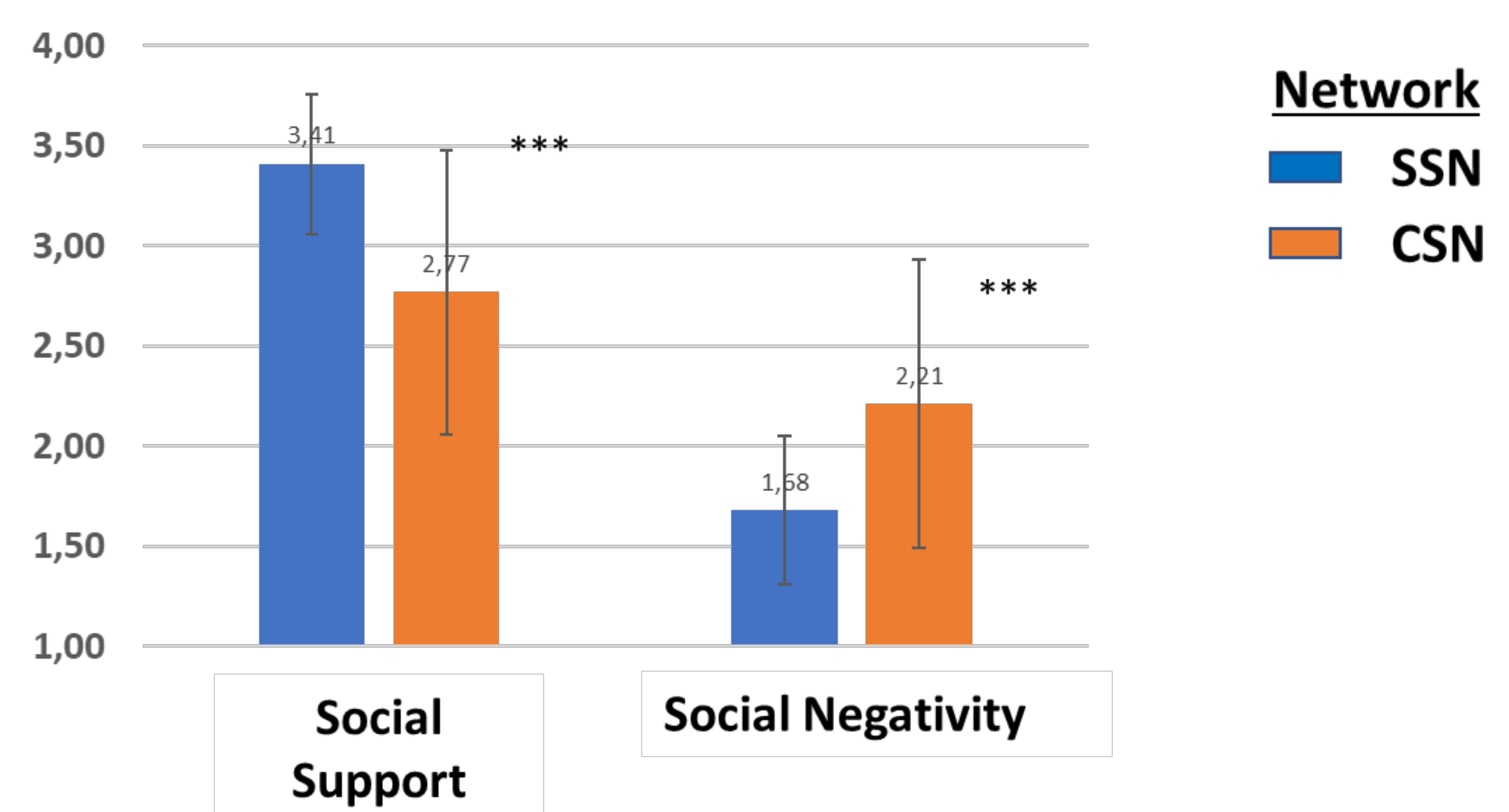
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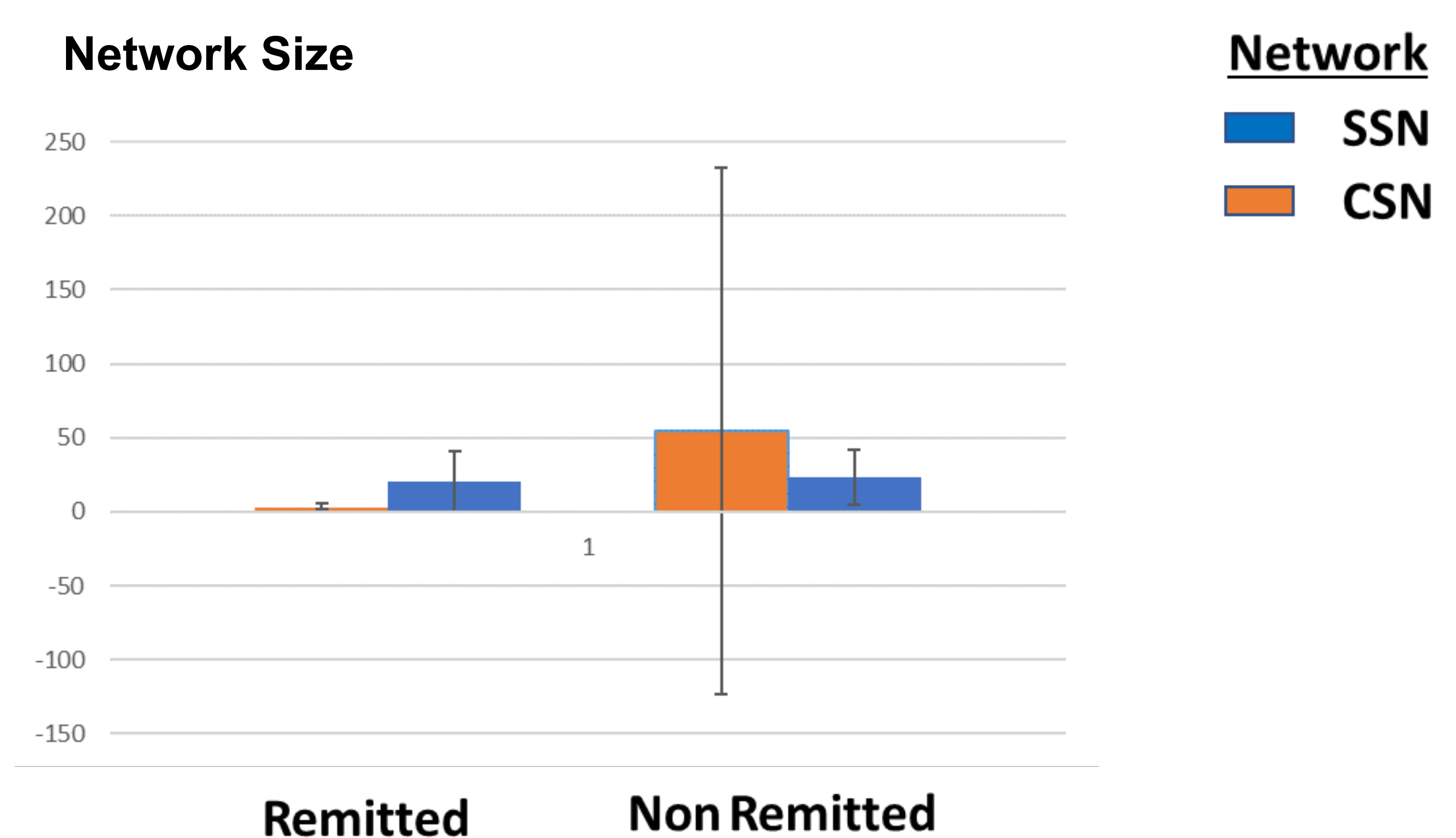
Sample

55 patients with AUD (F10.1, F10.2): 32 % women; M = 52 years, SD 16; 53% college degree; 51% married / partnership. 68% at least one child. Alcohol Usage Disorder: 16% harmful use; 84% Addiction. Remitted: 31%

RQ1: Structural and functional characteristics in SSN and CSN

There was no significant difference considering structural aspects between the CSN and SSN. Participants report more positive social support in the SSN **(d=.97),** and more negative social support in the CSN **(d=-.79).** The social negativity in the SSN (**d= 2.50)** is significant higher than the arithmetical minimum **(d=1.85).** The positive social support in the CSN is significant higher than the median of the scale **(d=2.50),** while social negativity in the SSN is significant lower **(d=-2.23).**

RQ 2: Differences between completely remitted vs. non-remitted participants

The SSN-Network Size of remitted patients is higher than the SSN-Network Size of non-remitted patients. The CNS- Network Size of non-remitted patients is higher than the CNS-Network of remitted patients

Discussion

ScNet is a suitable tool for the study of social network characteristics of persons with AUD. It enables to discover the ambiguity of social relations with regard to AUD. The SSN is characterized by a higher degree of positive social support and the CSN by a higher degree of negative social support. There is some degree of negative social support in SSN and even a medium degree of positive social support in CSN. Participants with remission more frequently reported to have a smaller CSN and less social negativity in their SSN. **Limitations**: Cross-sectional design, small sampe size. **Future research:** Based on these results of this pilot trial, a concept for a main study will be discussed.