

“Too much is never enough”

Psychological studies of substance misuse and other excessive behaviors

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Avhandling för avläggande av filosofie doktorsexamen i psykologi, som med vederbörligt tillstånd av samhällsvetenskapliga fakulteten vid Göteborgs universitet kommer att offentligas försvaras fredagen den 12 december 2014, kl. 13.00, Sal F1, Psykologiska institutionen, Haraldsgatan 1, Göteborg.

Fakultetsopponent är Professor Rolf Holmqvist från Linköpings universitet.

The dissertation is based on the following papers:

- I. Punzi, H. E., & Fahlke, C. (2015). Co-occurring self-reported behavioral problems in a Substance use disorder (SUDS) treatment population: Treatment perspective. *Alcoholism Treatment Quarterly*, 33, 000-000.
- II. Punzi, H. E., Tidefors, I., & Fahlke, C. Behavioral misuse among clients in substance abuse treatment. An interview study. Manuscript submitted for review.
- III. Punzi, H. E., Tidefors, I., & Fahlke, C. Excessive sexual activities among male clients in substance abuse treatment. An interview study. Manuscript submitted for review.
- IV. Punzi, H. E., & Tidefors, I. (2014). It wasn't the proper me. Narratives about alcoholism and view of oneself: The impact of disavowed shortcomings and dissociation. *Alcoholism Treatment Quarterly*, 32, 416-432.



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Abstract

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Substance misuse (SM) as well as excessive food intake, sexual activities, exercise, and gambling is characterized by repeated use against one’s better judgment and despite negative consequences. Moreover, SM and excessive behaviors (EB) might co-occur, and clients in substance abuse treatment who also have difficulties with EB are likely to relapse in SM and/or leave treatment. These clients benefit from a treatment that acknowledges both SM and EB, but EB might pass unnoticed in clinical practice. Researchers have suggested that there is a need both to investigate the occurrence of clients who experience EB, and enhance identification of EB among clients in substance abuse treatment. There is also a need to investigate how these clients perceive SM and EB, since their experiences are important for understanding the enactment of these behaviors, as well as how their difficulties might be handled in treatment. This thesis, based on four studies, investigated the co-occurrence of SM and EB among clients in substance abuse treatment, how these clients perceive SM and EB, and how SM and EB had been enacted against the client’s better judgment. In *Study 1* a questionnaire was used to investigate the occurrence of clients in substance abuse treatment who reported difficulties with EB. The results showed that 67 % of the participants reported EB, and 67 % of those reported two or more EB. In *Study 2* and *3* interviews were used to investigate how clients with experiences of both SM and EB, viewed their SM and EB, and how they viewed themselves. *Study 2* showed that EB were attempts to ease a sense of deficiency, and of being unworthy. In these attempts dissociation was central. Moreover, excessive sexual activities were described as deeply distressing. This motivated a specific investigation of excessive sexual activities in *Study 3*. The results showed that excessive sexual activities were associated with overwhelming shame, and that troubled sexuality seemed to be an absent topic in treatment. In *Study 4* interviews were used to investigate how clients with experience of alcohol misuse viewed their SM, how they enacted SM against better judgment, and how they viewed themselves. The results showed that SM was perceived both as a disease, and as a response to painful experiences. There was also a sense that one had to live up to strict demands on oneself to achieve a sense of being worthy. This perception was eased through dissociation. To summarize, the results showed that EB are common among clients in substance abuse treatment, which points to the need to identify EB and integrate them in treatment. Specifically excessive sexual activities need to be addressed. Moreover SM and EB might be seen as attempts to ease distress connected to relational and affective needs, to a sense of deficiency, and to self-criticism. It seems important to acknowledge affective and relational needs, perceptions of deficiencies and shame, and individual self-perception and dissociation, in clinical practice with clients with SM and EB.

Keywords: Substance misuse, excessive behaviors, dissociation, self, sexuality, shame

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