QUALITATIVE RESEARCH JOURNAL FOR SOCIAL STUDIES
ISSN Online: 3006-4686, ISSN Print: 3006-4678
Volume No: 02 Issue No: 04 (2025)

EXPLORING LIVED EXPERIENCES OF WIVES OF DRUG USERS: AN INTERPRETIVE PHENOMENOLOGICAL ANALYSIS

Dr. Riffat Sadiq * [Corresponding Author]
Assistant Professor Department of Applied Psychology, Govt. College Women University Faisalabad
Email: drriffat.haider@gcwuf.edu.pk
Ms. Maryam Rafiq**
Visiting Lecturer Department of Applied Psychology, Govt. College Women University Faisalabad
Email: maryamrafiq@gcwuf.edu.pk
Ms. Sumaira Hayat***
Visiting Lecturer Department of Applied Psychology, Govt. College Women University Faisalabad
Email: sumairahayat@gcwuf.edu.pk

Abstract
The present study explored the lived experiences of wives of drug users employing phenomenology research method. For that purpose, total ten participants (n =10), wives of drug users were recruited using purposive sampling technique. Data were collected using semi- structured interview form in individual setting, ensuring privacy and confidentially of the information provided. Analysis of the obtained data, via Interpretative Phenomenological Analysis (IPA), brought total five superordinate themes with subordinate themes on the surface, including1) Perception of Drug Use with five subordinate themes 2) Psychological Difficulties with eleven subordinate themes, 3) Social Difficulties with five subordinate themes, 4) Marital Difficulties with four subordinate themes, and 5) Coping with Psychosocial and Marital Difficulties with nine subordinate themes. Overall qualitative analysis, by delving into the heart of their lived experiences, vividly showed the adverse consequences for women living with drug dependent husbands. Findings of the present study are conducive in developing effective exclusive treatment plan and support system for this vulnerable group of women.

Key words*: Drug Users, Wives, Interpretative Phenomenological Analysis, Live Experiences.*

Introduction

Drug use is known as a chronic disease, causing physical, emotional, and social harm to users along with their family. It played pivotal role behind broken families and strained relationships (Schafer, 2011). Family members of drug abusers encountered various challenges like disrupted family relationships and social isolation (McCann & Lubman, 2018). Affected family members endured extreme level of stress, impairing their health and wellbeing (McCann et al., 2021). Dependency on substance caused significant burden for family, putting exclusive severe burden on their female caretakers (Sharma et a., 2019). Women of drug addicted men were overloaded with relationship problems, emotional problems, financial issues, dual roles, and other responsibilities (Daley 2013). Families, especially wives, of drug users are extremely vulnerable to psychological and social turmoil (Maghsoudi et al., 2019). Wives reported frequent beatings, living in fear, dealing with financial burdens, and feeling uncomfortable during forced sexual encounters (Zakaria & Ibrahim, 2022). Wives of drug users reported to have more suicidal tendencies (Noori et al., 2013). Unfulfillment of social responsibilities aggravated stress in partners (Pirsaraee, 2005). Psychological distress in wives of alcoholics was allied with marital satisfaction, domestic violence, and absence of family support (Kahler et al., 2003).

Both quantitative and qualitative research evidences demonstrated wives of drug users being overwhelmed by a plethora of psychosocial predicaments. Notwithstanding, further qualitative research strategies need to be

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exerted to gain insight what family members of drug users, especially females, feel and think about their life infused with diverse issues. Hence, the present study aimed to explore lived experiences of wives of drug users employing qualitative mode of inquiry and analysis as well. Through Interpretative Phenomenological Analysis (IPA), detailed examination of their lived experiences would be done, considering their own perspectives. In this regard, following questions have been postulated to explore how wives of drug users frame their experiences while living with drug users:

1. What kinds of experiences did wives of drug users have?
2. How did wives make sense of their lived experiences related to drug use problems?
3. How did drug users affect their wives and entire family?
4. How were wives dealing with drug addicted husbands and related outcomes?

Method

Research Design

The present qualitative project employed phenomenology method of inquiry to explore lived experiences of wives of drug users. Phenomenology focuses on human experiences, exploring what and how people experience something, assign meaning, and how they interpret their experiences as well.

Sample

Total ten participants (n =10), wives of drug users, were selected using purposive sampling technique. Ages of research participants ranged from 24 to 48 years with educational level of primary, middle, matric, and graduation. Their husbands were addicted to various drugs, while duration of drug use ranged from one (1) to twenty-eight (28) years. Among them, six were admitted in drug treatment and rehabilitation center at the time of data collection. While four drug users were currently out of treatment and rehabilitation process. Women who were diagnosed with physical chronic illness/disability or living separately from their husbands were not the part of the present project.

Measurement

A semi-structured interview form was developed to collect qualitative data from the wives of drug users. Part A was related to demographic information of the participants and drug abuse history of their husbands as well. Questions included in Part B were framed to explore lived experiences of the participants, connecting them drug addicted husbands and related activities. These questions were opened ended, aiming to have rich information about fallouts of diverse nature as the function drug use. All questions were framed in Urdu, making them easier for the quick understanding and feasibility of the participants.

Procedure

For the purpose of initiating present project, first consent was taken from the administration of drug treatment and rehabilitation center and then from the families (wives) of drug users, including wives of those who were not seeking treatment for drug use problems at the time of data collection. Informed consent was individually signed by all research participants. Qualitative interview was conducted in individual setting, ensuring privacy and confidentiality of the data they provided. Arrangement of individual setting was also for the provision of supportive environment in which they could feel to be emotionally and physical secure enough to share their experiences without hesitation. Notes were maintained during interview, whereas recording of their shared experiences was done with their consent. Finally, all participants were paid thanked for being the part of the present study and information they provided to gain insight how they experienced their life being the wives of drug users.

Data Analysis

As lived experiences of wives of drug users were explored deeply using phenomenology research method; therefore, data was analyzed using Interpretative Phenomenological Analysis (Smith et al., 2009). This data

QUALITATIVE RESEARCH JOURNAL FOR SOCIAL STUDIES
ISSN Online: 3006-4686, ISSN Print: 3006-4678
Volume No: 02 Issue No: 04 (2025)

analytic technique, Interpretative Phenomenological Analysis (IPA), involved ideographic approach, emphasizing on the individual analysis, for this reason, both recorded content and field notes were reviewed to have the idea what and how each participant framed, understood and interpreted her experiences living with drug addicted partner. Analysis was done from the perspectives of the participants how they assigned meaning to their experiences and how husbands' addiction and related activities adversely affected them. Superordinate and subordinate themes were extracted separately besides reporting the statements given by every participant in the connection of questions framed to meet the present research objectives.

Results and Discussions

Table 1: *Summary of Demographic characteristics* (*n* =10)

Participants	Age	Educational Level	Duration of Marriage	No. of Children	Duration of Husbands' Drug Use	Types of Drugs Used by Husbands
1	38 Years	Matric	18 Years	3	1 Year	Poly drug use
2	48 Years	Primary	20 Years	1	11 Years	Alcohol
3	42 Years	Matric	22 Years	4	28 Years	Heroin
4	40 Years	Middle	17 Years	4	4 Years	Ice
5	43 Years	Middle	26 Years	3	6 Years	Alcohol
6	24 Years	Graduation	2 Years	1	14 Years	Poly drug
7	34 Years	Primary	12 Years	3	20 Years	Cannabis
8	30 Years	Middle	10 Years	1	20 Years	Poly drug
9	42 Years	Primary	22 Years	6	15 Years	Poly drug
10	38 Years	Matric	16 Years	4	20 Years	Heroin

According to the summary of demographic characteristics (**Table: 1**)), ages of the participants were 24 (01), 30 (01), 34 (01), 38 (02), 40 (1), 42 (02), and 48 (01) years with educational level of primary (03), middle (03), matric (03), and graduation (01). They were married for last 2 years (01), 10 years (01), 12 years (01), 16 years (01), 17 years (01), 18 years (01), 20 years (01), 22 years (02), and 26 years (01). Among them, three participants were with 1 child, three with 3 children, three with 4 children, and one with six children. Duration of the husbands' drug use was 1 year (01), 4 years (01), 6 years (01), 11 years (01), 14 years (01), 15 years (01), 20 years (03), and 28 years (01). Their husbands were addicted to alcohol (02), heroin (02), ice (01), cannabis (01), and poly drug (04).

QUALITATIVE RESEARCH JOURNAL FOR SOCIAL STUDIES
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Volume No: 02 Issue No: 04 (2025)

Table 2: *Summary of Superordinate themes and Subordinate Themes obtained through Interpretative Phenomenological Analysis (IPA)*

Sr.	Superordinate Themes	Subordinate themes
1.	Perception of drug use	It is a curse It is a sin and evil Bring destructions in life It is merely a death
2.	Psychological Difficulties	Frustration Sadness Hopelessness Lack of interest Negative thoughts Feelings of shame and guilt Fear Anger Suicidal ideation Sleep difficulties
3.	Social Difficulties	Social isolation Social stigma Criticism Devaluation and humiliation
4.	Martial Difficulties	Lack of financial support Low sexual desires and affection Mistrust in marital relation Physical and verbal abuse
2.	Coping with Psychosocial and Marital Difficulties	Offering prayer and seeking help from Allah Spending time with significant relations Patience Reading books Engaging own self in work Neglect and Emotional distancing Silence

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Volume No: 02 Issue No: 04 (2025)

1. **Perception of Drug Use**

The first superordinate theme emerged through qualitative analysis of the raw data is "Perception of Drug Use". This theme indicated how participants perceived and felt about the problem of drug use. They shared their experiences regarding drug use, considering it a complete damage for personal and family life. According to them,

"It is a curse that causes damage not only to a user but to all those who are affiliated with him. It burns everything (P-1).

"Drug use is a sin; it damages the sense of right and wrong. My husband has become an animal due to continuous drug use" (P- 2)

"Drug use is a sin, an evil only. Person forgets how to be a good human. Our religion (Islam) prohibited alcohol and other drugs. Despite that, my husband persistently uses alcohol and behaves immorally"(P-3).

"It brings destructions for all. My husband's personality has been destroyed that also negatively influenced me and my children [sadness on face, tears in eyes. I have seen only destructions since my husband started using drugs" (P-7)

"*Drug use does not let a person capable to do anything. It ends the life and invites the death (P-9)*

"[With angry expression] It makes a person dysfunctional who neither takes care of own self nor does he pay his responsibilities. I must say that drug use is a way of escaping from responsibilities (P-10).

Noticeably, drug use is a source of numerous problems, including psychological, social, and financial challenges. In the support of this, previous studies revealed how drug has damaged families, especially women. Qualitative research findings demonstrated the financial, social, psychological, physical, and cultural consequences families of addicted members encountered (Mardani et al., 2023). In the present study, their reported adverse experiences of living with addicted husbands formed their absolute negative perception of drug use, such as destruction, evil, sin, death, curse, etc.

2. Psychological Difficulties

Another important theme came on the surface, with regards to lived experiences reported by the wives of drug users, was Psychological Difficulties. Under this superordinate theme, total eleven subordinate themes have been identified. Pertaining to the **frustration, sadness, hopelessness, and lack of interest**, participants stated that,

"I have buried my happiness, no hope in life. I am too frustrated and feel emptiness in myself (paused for few minutes) (P-1).

"My circumstances have cultivated hopelessness in me. Nothing can be amended. For how long can I bear all these? Sometimes, I strongly desire to go away from home, leaving behind all"(P-2)

"(Slowly talking,) Neither I like anything nor do I have interest in daily activities. Even, I have less interest in people and prefer to remain away from them" (P-6).

Drug users gave life to their wives spilled over with pain, deprivation, and miseries, as a result, they experienced psychological trauma. They were expected to take care of their addicted husbands, and to hold their families together at the expense of their personal needs and desires. Resultantly, they experienced hopelessness and sadness, taking their happiness and interest in life far away from them, as shared by the participants of the present study. Talking slowly and pausing for few minutes were the indication of how much they were unhappy, hopeless, and sad. Their frustration, hopelessness, sadness, and lack of interest are likely to develop depressive disorder among wives of drug users if remain persistent. Existing scientific evidences confirmed the risk of developing depression among women of drug dependent partners (Noori et al.,2015).

QUALITATIVE RESEARCH JOURNAL FOR SOCIAL STUDIES
ISSN Online: 3006-4686, ISSN Print: 3006-4678
Volume No: 02 Issue No: 04 (2025)

N**egative thoughts, feelings of shame and guilt** were subordinate themes extracted from the description of experiences shared by the wives of drug users. Their repetitive negative thoughts were related to their self and family, while their feelings of shame and guilt were developed due to their husbands. They shared their experience in that way,

"I have intense feelings of shame and that shame has ended me. I have persistent thoughts what people would say or think about me and my family, for this reason, we live alone [P-1]

"When your partner is addicted to drugs, then you cannot introduce him to people due to shame" [P-6]

"*I have negative thoughts about myself, my future, and my children as well. I consider myself worthless, cursed, and incapable who does not deserve happiness and satisfactory life, perhaps, I am responsible for all this. I could not make decision on time; it is my fault" [P-8]*

Drug dependent partner is not less than a trauma for a wife, cultivating negative thoughts, feelings of shame and guilt. Women of South Asian societies emotionally, economically, and socially dependent on male family members. If male members fail to fulfill family and social responsibilities, the burden is automatically shift towards female family members. Fulfilling social, emotional, and financial needs of entire family is onerous job, while multitasking can cause mental exhaustion and stress. Constant stress and broken promises damaged their self-worth. Unethical activities and lack of responsibility on the part of addicted husbands further might be fueling negativity, feelings of shame and guilt in wives, making them feel judged by others. Participants of the present study also seemed to internalized their spousal drug dependency, blaming themselves for not finding the solution of this chronic problem and associated consequences, as was reflected through their reported experiences. Women of drug users are deprived of social support and blamed for their husbands' addictive behavior (UNODC, 2002).

Fear and Anger were also in the list of experiences shared by the participants of the present study. They explained that,

"*I keep thinking about my future that seems dark. Negative and fearful thoughts come in mind again and again and I get upset" [P-5]*

"I fear of being destroyed at the hands of my husband. Nothing will be left behind for me and my children. I am concerned about the future of my children. How will they complete their education? People do not like the families of drug users" (P-7)

"I have angry thoughts and feelings towards self and others. I keep arguing with children and others as I am surrounded by destructions and miseries" [P-9]

A wife talked angrily with high tone and restless body postures. She stated her psychological experiences in response to drug dependent husband,

"*I have anger control problem. I express anger towards all due to numerous issues. All are responsible for my misfortune and current circumstances" [P-10]*

Drug initiation and maintenance enter the life like a disaster that demolishes everything significant to individuals, such as finance, affection, relationship, family reputation, etc. Women, by nature, are sensitive and caring towards family relations. When they see significant decline in family reputation, affection, and fulfillment of needs, they feel and think negative about own self and future, as discussed earlier. Owing to multiple issues, wives of drug users could not remain mentally stable. Consequently, they were expressing their hidden frustration and negative thinking through anger and fear, as was observed in the present study. Their anger was also manifested by their high tone and restless posture during interview. Previous studies also reported aggression in women of drug users (Nazifi, 2005). Participants were severely disturbed that was revealed by their views about life.

They expressed desire to die as death seemed to them only solution for their problems they were entangled with. Related to the subordinate theme "**suicidal ideation"**, participants elaborated their

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Volume No: 02 Issue No: 04 (2025)

experiences which made ground for preferring death over life,

"[tears in eyes] My mind is not properly working due to persistent thoughts. The pain my husband gave me has finished me. My inner is now dead, no interest in long life" [P-1]

"My in-laws blame me for my husband's drug use problems. I hate my husband and his family. Sometimes, I strongly desire to commit suicide but owing to my children I could not do that" [P-3]

"Before marriage, I was treated as a princess by my family. But after marriage, I have been entangled with worries and problems. I am extremely frustrated that reduced my interest in life. I did not want to live like that, therefore, I want to end it" [P-8]

"(Crying)I do not want to live here. I want to die as life is too difficult for me[P-9]

"I am dependent on others. I have fallen in a swamp, no way to come out of it [sad eyes]. Such kind of life should be end (P-10)

Participants of the present study experienced deep emotional pain and chaos. Drug dependent partners destabilized the family, destroyed family reputation and finance, leaving behind their wives with unmet needs and broken heart, as a result, wives experienced psychological difficulties. Sense of despair, helplessness, negative thoughts, and frustration aggravated their feelings of being trapped in unchangeable circumstances, reducing their interest in life, as was noted in the present study. The emotional burden they carried with them for a long time was revealed by their words, teary eyes, and crying spells, pushing them toward death. Other researchers also documented drug use problems as strong predictors of suicidal attempts in women. Women with drug addicted partners or parents are more likely to attempt suicide (Fallah et al., 2023). In the connection of subordinate themes, **sleep difficulty and anxiousness**, participants further shared their experiences,

"I am overwhelmed by tensions and worries since my husband started using drugs. I remain anxious to the extent that I could not get sound sleep" [P-4]

"All the time, I remain worried, could not properly focus on daily routine. Even, I could not sleep properly, my mind wanders during sleep." [P-7]

Wives of drug users were not mentally stable and worried for various issues which increased anxiousness and disturbed their sleep. Participants experienced immense strain living in an unpredictable and volatile home environment created by their drug dependent husbands. Even in the absence of immediate threat, their mind kept racing with thoughts that made it difficult for them to relax and get sound sleep. Diverse issues, as framed by the participants, eroded their ability to cope that zoomed the cycle of anxious days and sleepless nights. Other researchers also documented the association of sleep problems with anxiety symptoms (Ding et al., 2023), stress and anxiety (Alwhaibi & Aloola, 2023).

3. Social Difficulties

Under the superordinate theme, Social Difficulties, total five subordinate themes have been identified, encompassing social isolation, social stigma, criticism, humiliation/devaluation, and harassment. Participants shared their experiences of **Social Isolation and Social Stigma** as the result of drug use problems in their husbands. During interview, they explicitly told what they have been facing and how they were treated by the community and relatives like,

"In-laws and husband blame me for the current circumstances. Close relatives do not like to have relations with us due to my husband's addiction and negative behavior" [P-1]

People frequently ask questions about my husband; therefore, I do not attend events and social gatherings. [P-2]

"People keep themselves away from us. People of my town do not like to hire me as a maid because of my husband unethical behavior"[P-3]

"Life is very difficult; my children listen negative words about own self but say nothing. People talk about my daughters. We have isolated own self because negative attitude of people is no more tolerable"[P -5]

QUALITATIVE RESEARCH JOURNAL FOR SOCIAL STUDIES
ISSN Online: 3006-4686, ISSN Print: 3006-4678
Volume No: 02 Issue No: 04 (2025)

"People do not give us respect. I could not find suitable marriage proposals for my daughters yet. People stay away from us"[P-8]

Drug use is still perceived as an immoral act rather than an illness, connecting it with unethical and criminal activities (e.g, robbery, theft, quarrel, illicit sexual behavior, etc) that put family reputation at risk. In order to keep own safe fromthe hazards of drugs and associated repercussions, community discriminated and isolated the entire family of drug users, as shared by the participants of the present study. It is also evident by a previous qualitative analysis that identified the association of cultural and family stigma with substance use problems (Monari et al., 2024).

Criticism, Devaluation, and Humiliation are other subordinate themes of social difficulties. Wives further explained how they were humiliated and devalued by the community. During interviews, wives commented over attitude of people and community towards them,

People do not like to mingle with us. They have labelled my children (jahaz ke bachey). I feel intense pain to hear it "[P-3]

"Before marriage, I had respect among relatives and in community. Now, I have no value and respect at all (teary eyes). Even close relatives humiliate and criticize me and my children as if I made my husband addicted to drugs [P-5]

"Due to my husband's addiction, me and my children are not being given respect. We face criticism and negative treatment" [P-6]

"(weeping) People humiliate my children saying them "children of airplane (jahaz key bachey)" [P-7]

"In-laws of my daughter frequently criticize and devalue us due to my husband's addictive behavior" [P-9]

"Other children in school and community make fun of my children. Not all, but few close relatives taunt and devalue me. They blame me for my husband's current health condition and attitude" [P-10]

That was more painful experience described by the wives of drug users. Frequently listening harsh and negative words from others have emotionally wounded them, making their life a hell. They could not stop weeping while sharing how their children were humiliated by calling "jahaz ke bachey". These words are just like a knife that cut the heart of a mother. This attitude of community is likely to develop fear of evaluation in families of drug users. Fear of negative social evaluation not only causes emotional distress but damages their social relationships as well (Velosu et al., 2012, as cited in Kahraze et al., 2018).

One more subordinate theme emerged in the connection of social difficulties is **Harassment.** Participants shared their experience related to harassment,

"*Whenever something is stolen, people of surrounding put instant blame on my husband and started quarrelling. While going out, I face sexual harassment. People know that my husband is not in position to provide security to his family [P-9]*

Another wife pointed out sexual harassment she experienced while going out of home,

"Men keep staring at me whenever I go out. I also listen negative words and remarks about own self [P-8]

Universally, men are protectors of their women, ensuring their physical and emotional safety. But when men, themselves, exhibit physical and emotional instability, it threatens the protective shield their women surrounded with. In such situation, women are easily targeted by other, verbally, physically, or both. It was shared by the participants of the present study who were blamed for every misfortune happened to people, without confirming their husbands' involvement in incident. Even, people took advantage of women stepping out of home alone.

QUALITATIVE RESEARCH JOURNAL FOR SOCIAL STUDIES
ISSN Online: 3006-4686, ISSN Print: 3006-4678
Volume No: 02 Issue No: 04 (2025)

5. Marital Difficulties

The superordinate them**e,** Marital Difficulties, included the subordinate themes of lack of financial support, low sexual desires and affection, mistrust in marital relation, physical and verbal abuse.

Lack of Financial Support was commonly being faced by the wives of drug users. The experiences related to financial issues and paid work they were doing to meet financial needs of the family were shared in that way,

"*My husband spends all amount on drugs. He does not give a single penny. Due to that, me and my children are economically dependent on others. I also do paid work but that amount is not enough for entire"* [P-1]

"My husband is suspicious and does not let me do paid job. My younger brother financially supports me. Despite that, I could not manage money to get medical treatment [weeping]. Sometimes, me and my son go to bed without taking meal due to the shortage of money" [P-2]

"I have to borrow money from others that is very shameful for me. Every month, I have to put request for money before my in-laws. I am dependent on others because my in-laws do not let me do paid job" [P-5]

"My husband is useless. I do work in fields and homes due to financial problems. My children could not get education and working as labors" [P-9]

Wives of drug users were going through adverse circumstances which ruined their psychological and social health. Finance is a fundamental need of humans, connecting them to the outer world. Fulfillment of basic needs like food, shelter, and education depends on how much money an individual has in pocket. Wives of drug users encountered severe economic issues as stated by one participant who along with her son slept without taking meal. Previous studies also reported drug use as a leading cause of financial strains (Manurung, 2024).

Related to subordinate theme, **Low sexual desires and affection**, wives of drug users told the reasons of restricting them from having relations with their drug addicted husbands. One of them explained,

"*There is no more affection in our relationship. My husband remains busy with drug use and related activities. His behavior made me frustrated, as a result, I do not feel sexual attraction towards him. I want him to be stayed away from me. I have no love feelings for him rather I pray for his death" [P-2]*

Another wife shared her experience related to low sexual desires and affection in that way,

"For me, marriage is a horrific dream. I hate my husband, no affection, no love and no desire to have sexual relation with a man who ruined my life"[P-6]

Wives of drug users remain on the edge of unlimited deterioration, marital conflicts, and psychological turmoil. With mental disturbances and traumatic experiences, women could not feel satisfaction in marital relations that diminished their sexual interest and affection towards partners. Evidences provided by other researchers also revealed that wives of drug users were uncomfortable to have sexual relations with drug addicted husbands (Zakaria & Ibrahim, 2022).

While reporting further deterioration of their marital relations, wives of drug users shared the experience of **mistrust in marital relation**. In this regard, participants expressed their views,

"I try to stay away from my husband. He is no more reliable for me. He is liar and cheater. He has relationship with other women but people blame me for his illicit behavior [P-2]

"I do not trust my husband. He sold utensils and homeappliances. He is the source of all tensions and problems"[P-4]

"My marital life is a punishment for me. My husband does not care what I want, he is happy with drugs. He cheats and frequently lies. He cannot give me anything because he is not a trustworthy person. He destroyed entire family" [P-6].

Researches, done on drug users and their activities, revealed significant association of drug/substance use

QUALITATIVE RESEARCH JOURNAL FOR SOCIAL STUDIES
ISSN Online: 3006-4686, ISSN Print: 3006-4678
Volume No: 02 Issue No: 04 (2025)

with crimes (Rafaiee et al., 2022), with sexual risk and adverse sexual health consequences (Khadr et al., 2016). In the present study participants reported their husbands lying, cheating, selling home appliances/utensils instead of providing monetary support. Additionally, financial issues aggravated marital conflicts and mistrust toward drug addicted husbands. Having relations with other women is the darkest aspect of marriage wives of drug users talked about.

Participants of the present study reported to be the victim of **physical and verbal abuse** at the hands of their drug addicted husbands. They framed their experiences of being tortured,

"My husband frequently quarrels and uses abusive language with us. The whole family environment has become a hell" [P-1]

"Several times, I was beaten by my husband [crying spells]. I want to get divorce but my close relations are not in favor of divorce. For how long can I endure beating behavior of my husband?" [2]

"He keeps creating problems for us. He shouts and starts quarrelling with me" [P-5]

Drugs or substances deteriorates cognitive, emotional, behavioral, and moral functioning of users. Substance abuse is a leading cause of domestic violence, trust/relationship breakdown, and unstable home environment (Manurung, 2024). Culturally, women accept beating behavior and abuse within family environment. Majority women withdraw from their decision to end their marital relation for the sake of children, as also shared by a wife. Participants of the present study were in toxic relation for years, enduring physical and emotional pain as was seen in their eyes filled with tears.

5. Coping with Psychosocial and Marital Difficulties

Participants of the present study were using various coping strategies in response to psychological, social, and marital difficulties. Under the superordinate theme, Coping with Psychological and Marital Difficulties" participants reported nine coping strategies, including offering prayer and seeking help from Allah, patience, spending time with significant relations, reading books, engaging own self in work, neglect and emotional distancing, silence, displacement, and avoidance.

Pertaining to first theme, **offering prayer and seeking help from Allah**, wives shared their experiences,

"*Life is full of miseries. I offer prayer and ask Allah to make a way for me. I try to be relaxed by offering prayer"* [P-2]

"*I relay on Allah rather than on people. I ask for His guidance and help*" [P-5]

Wives were with broken heart, deprived, and overwhelmed by difficulties of diverse nature. They were victim of social isolation and stigma that strengthened their sense of mistrust towards husband, relatives, and community as well. In that situation, they perceived only Allah healing their wounds. Universally, people strongly believe that Allah (God) is the only provider and helper for the needy. For this reason, wives of drug users turned towards Allah, seeking His help through prayers. It is also supported by the previous study that noted religious coping (e.g, prayer, supplication, & attending mosques) as the choice of people dealing with challenges (Cinici, 2024).

Patience was another strategy being used by the wives of drug users to cope with life difficulties. They shared the experiences of exhibiting patience in daily life,

"*I have increased my level of patience in response to problems. What can I do else? Only Allah gives patience" [P- 1]*

Through patience, I try to control my negative emotions. Every day, I make myself understand so that I can do something for my children" [P-3]

Wives of drug users preferred to employ patience as a coping strategy in order to regulate their emotions, sustain stability in home, and to focus on other essential tasks such as child rearing. Patience is an adaptive coping that helped participants of the present study to stand firm again life adversities,

QUALITATIVE RESEARCH JOURNAL FOR SOCIAL STUDIES
ISSN Online: 3006-4686, ISSN Print: 3006-4678
Volume No: 02 Issue No: 04 (2025)

as they shared. Previous studies also revealed significant association of patience with stress tolerance (Al- Arja, 2023).

In response to psychosocial and martial difficulties, **spending time with significant relations**, was identified as a coping utilized by the participants who stated that,

"Sometimes, I talk to my parents and sibling via phone and share my pain with them. Sometimes, I visit my friends to spend time with them in order to feel relaxed. My father loves my children a lot. My brother is also very supportive" [P-4]

I spend time with my sisters and two friends. They listen my problems and encourage me a lot. While being with them, I feel relaxed and keep struggling to live" [P-7]

Participants found a way to relax own self amidst the chaos of their husbands' drug use problems. By expressing emotions and sharing of pain with significant ones, they were trying to reduce their feelings of loneliness, isolation, sadness, and to make own resilient against life challenges, as they reported. It is consistent with the previous research finding that proved the importance of family and significant others in decreasing stress, anxiety, and depression but increasing positive affect (Acoba, 2024).

One participant was **reading books** and found it the best way to get mental relaxation. She shared her experience,

"I read books to energize myself instead of arguing with others. I like to read novels and history" [P-5]

She has stopped arguing with others since she started reading books for spending her time. Books helped in diverting her attention from difficulties, and motivational words she absorbed made her strong against misfortunes, as she experienced. In fact, books are associated with psychological well-being and enjoyment (Yulia et al., 2021).

Engaging own self in work is another subordinate theme of "Coping with Psychosocial and Marital Difficulties" identified through qualitative analysis. In this regard, participants framed their experience,

"I remain busy in paid work. Bring raw material and make products staying at home. Besides, I do household chores. I do not want to think about my husband and negative people" [P-3]

"I get busy myself with variety of activities. I spend time with children, listen their issues, and find solution for them. Although, I have no financial issue, and get money on monthly basis from family business, despite that, I also do part time paid work to remain busy" [P-8]

For them, keep doing something was much better for their psychological health rather than sitting idle and thinking about husbands' drug use and related issues. Wives considered their working habit as buffer against negative thinking and frustration. In reality, working from dawn to dusk may or may not be helping in a long run, but wives found it appropriate coping strategy in response to multiple issues they were combating with.

Wives also employed **neglect and emotional distancing** as coping to lessen marital difficulties and prolong pain they were experiencing, as they verbalized.

"Despite living together, I have gone far away from this man who never cared of me. He did not pay attention to our needs and wishes. My heart does not desire to be closed to him"[P-3]

"I do not feel anything about my husband. I have detached myself from him. I am compelled to live with him but I do not feel to have him" [P-9]

Keep facing psychological, social, and marital difficulties simultaneously for last several years, they mentally succumbed and found maintaining emotional distance from husbands better than being in relation, as reported by the them. Drug use is a source of martial conflicts ((Abdullah et al., 2024), making home insecure for family and losing borders within family environment (Maghsoudi et al., 2019). In order to prevent further harm, wives decided to neglect their addicted husbands and buried their own emotions and feelings. Although,

QUALITATIVE RESEARCH JOURNAL FOR SOCIAL STUDIES
ISSN Online: 3006-4686, ISSN Print: 3006-4678
Volume No: 02 Issue No: 04 (2025)

it is a painful strategy but, in their opinion, was effective in adverse circumstances for the time being. Participants shared their experiences of using **silence** to cope with difficulties. According to them,

"I have listened harsh words due to my husband's addiction. But I decided to be silent and focus on responsibilities" *[P-4*]

"Usually, I behave according to situation. But for last few months, I started preferring silence instead of answering back "[P-5]

Continuous encountering with psychosocial and martial issues made wives of drug users mentally and physically exhausted to the extent that they eventually created a solid shield around own in order to handle their crises privately. The got tired by justifying own self and preferred to focus on life tasks waited to be accomplished, as they shared. People use silence as a coping strategy in response to relationships, the feelings of hurt, anger, and frustration (Agarwal & Prakash, 2024).

Regarding the strategy of **Displacement**, participants commented about own attitude towards others And life adversities.

"*Several times, I have beaten my children due to my husband and others who do not solve the problem but keep blaming me for this misfortune" [P-3]*

"Sometimes, I beat my children and expressed my anger and frustration on them" [P-7]

Children were convenient object on whom they expressed their frustration and anger. While living in isolation, they found no other way but to target own children. Wives were not being emotionally and financially supported by husbands; while close relatives even biological brothers did not share their pain. In such situation, they found their children as the substitute target for emotional expression, considering them less threatening in comparison to drug addicted husband and people who kept humiliating and devaluing them, as wives of drug users shared. Other researches also observed people using displacement as a coping to regulate their stress (Mohiyeddini & Semple, 2013).

Participants seemed to employ **Avoidance** to cope with psychosocial and marital problems. They expressed,

"I avoid having relations with anyone. I want to go far away from all. That is the only solution of my problems" [P-2]

"*What can a poor woman do? I avoid my husband and stay away from him*" *[P-9]*

"*I avoid meeting people. I also make my children understand not to pay attention what others are saying. Keep focus on your studies. I stopped arguing with my husband*" *[P-10]*

Participants distanced own self from the drug users and community, saying it was useless to justify own self before people who were not ready to realize what you heart was feeling. Previous studies also showed affected family members using avoidance as a coping in response to fallouts of drug use (Singh et al., 2021).

Conclusion

The present study addressed the problems faced by the wives of drug users from their own perspectives. Nuanced exploration of lived experiences, via IPA, uncovered a range of psychological, social, and marital issues wives of drug users were encountering. Coping strategies, they personally employed, seemed to them effective in dealing with difficulties of diverse nature besides regulating own self amidst chaotic situations created by their drug dependent husbands. Qualitative exploration of personal perception with regards to drug use and their frame of lived experiences uncover unique and profound hidden suffering that requires robust and effective psychological, social, and moral support system for the wives of drug users.

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