

The Relationship Between Social Stigma and Self-Identity Among Recovering Female Juvenile Delinquents from Substance Abuse

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Research Summary:

The current study aimed to identify the correlational relationship between social stigma and self-identity among female delinquents recovering from drug abuse. The study adopted the descriptive correlational approach, and the study sample included (67) female delinquents recovering from drug abuse. To achieve the research objectives, the researchers sought to build a social stigma scale based on Erving Goffman theory (Goffman, 1963), and to adapt the scale (Al-Rababah, 1994) which is based on the scale of Adams, Bennion & Huh (1989). The researchers used the Statistical Package for the Social Sciences (SPSS) to statistically analyze the data. The researchers concluded that there is a statistically significant inverse correlation at the significance level of (0.05) between social stigma and self-identity, which means that the higher the level of social stigma, the lower the level of self-identity formation among the female delinquents recovering from drug abuse.

Keywords:

Self-identity, social stigma, female delinquents, recovering addicts, drug abuse.

Research Problem:

Drug abuse is a complex issue whose effects do not end with the use itself, but continue even after recovery, particularly among female delinquents who face compounded challenges related to the nature of the social and cultural structure that imposes strict value judgments on their behavior. Among the most significant obstacles they face is social stigma, which attaches negative attributes to women, distorting their social identity and causing disturbances in their personal and psychological makeup (Goffman, 1963: 3). This contributes to feelings of inferiority, isolation, and psychological and social alienation, negatively impacting their overall adjustment (Ibrahim, 2000: 214).

The danger of this stigma increases when the recovering offender faces a double societal punishment of exclusion, marginalization, rejection by society, and not being given a second chance (Shaib and Ba'yu, 2017: 76). This generates a deep-seated feeling of shame and disgrace that drives them to evaluate themselves negatively and harshly as a result of society's labeling of them (Dheeb and Azzouz, 2022: 45). This devastating effect is reflected on the family as well, which in turn suffers from social isolation and loses its role as a containment environment (Al-Laithi, 2022: 443). This represents a real obstacle that increases the likelihood of returning to crime and relapse again as a result of social rejection and discrimination (Al-Ruwaili, 2008: 23, Rabi', 2017, Al-Zawahra, 2022: 423-444).

The Importance of the Research :

The importance of this study lies in highlighting the variable of self-identity among recovering female delinquents. Identity is an integrated system that grants the individual stability and consistency in a constantly changing world. The research problem arises from the fact that the social stigma surrounding recovering women constitutes a dynamic obstacle that threatens this internal consistency and cohesion over time, hindering the recovering woman's integration into her community and culture (Abdul Rahman, 1998: 400). From a developmental and psychological perspective, the identity formation stage requires cognitive maturity and role exploration before making a commitment decision (Ali, 2007: 45). However, recovering female delinquents often encounter intense environmental and social pressures represented by stigma. Herein lies the urgent need to provide recovering women with the opportunity to explore their roles and experiment with methods that suit them to build a new, positive identity, without imposing a distorted identity or forcing it upon them (Abu Ghazal, 2006: 94).

Therefore, the importance of the current research lies in revealing the nature of the relationship between social stigma and self-identity among female offenders recovering from drug abuse. This provides a database and a realistic diagnosis that contributes to guiding preventive plans and subsequent programs for dealing with this group. This importance is specifically evident in the following aspects:

1. Highlighting the category of female offenders recovering from drug abuse as one of the most vulnerable groups in need of psychological and social support.
2. Uncovering the nature of the relationship between external pressures, represented by social stigma, and the internal psychological structure represented by the self-identity of these recovering women.

Research Objectives:

The current research aims to:

1. Identify the level of social stigma among female juvenile delinquents recovering from drug abuse.
2. Identify the level of self-identity among female juvenile delinquents recovering from drug abuse.
3. Identify the nature and strength of the correlation between social stigma and self-identity among female juvenile delinquents recovering from drug abuse.

Research Scope:

The current research is limited to female juvenile delinquents recovering from drug abuse in social rehabilitation centers and institutions in Baghdad, Iraq, aged 12-18 years in 2026.

Defining Terms:

First, Social Stigma: It has been defined by:

1. Goffman (1963): Goffman views social stigma as the internalization of negative meanings resulting from society's emotional, cognitive, and behavioral reactions towards an individual or group of individuals who possess characteristics contrary to those accepted by society. It is also a trait or behavior that society considers a mark of shame, leading to a reduction in the individual's value and humanity (Goffman, 1963: 56).
2. Becker (1973): It is a social process that determines the extent to which a person's identity is affected by society's perception, based on a behavioral or physical criterion. Human society, regardless of its nature, establishes many general rules that regulate human behavior, maintain the stability and balance of the general situation, and reinforce its ideal image (Abu Sbeitan, 2014: 39).
3. Theoretical Definition of Social Stigma: The researcher adopted Goffman's definition (Goffman, 1963).
4. Operational definition: It is the total score obtained by female offenders recovering from drug abuse through their response to the items of the social stigma scale.

Secondly, Self-Identity, as defined by:

1. Erikson (1963): It is the continuity in an individual's understanding of themselves and their meaning to others (Erikson, 1963: 261).
2. Al-Jurjani (1983): Identity is an absolute reality encompassing truths, like the seed encompassing the tree in the unseen. Identity is valid in all existence, provided the reality of existence is taken without any condition, neither something nor nothing (Al-Jurjani, 1983: 28).
3. Theoretical Definition of Self-Identity: The researcher adopted Erikson's definition (Erikson, 1963).
4. Operational Definition: It is the overall score obtained by female offenders recovering from drug abuse through their responses to the items on the Self-Identity Scale.

Thirdly / Juvenile Delinquents:

1. (Ministry of Justice, 1983): This refers to anyone who has reached the age of nine but not yet eighteen, whether male or female. There are two categories: boys who have reached the age of nine but not yet fifteen, and girls who have reached the age of fifteen but not yet eighteen (Ministry of Justice, 1983: 5).
2. Juvenile Delinquency from a Psychological Perspective: The Dictionary of Psychologists defines juvenile delinquency as "behavior that does not conform to group norms" (Katfi, 2014: 288).

The concept of social stigma:

Social stigma is a social process that affects an individual's identity according to how society views them based on standards related to behavior or physical appearance. Human societies, regardless of their characteristics, work to establish general rules aimed at regulating human behavior and ensuring the stability of the general balance, in addition to promoting the ideal image of society. (Becker, 1973: 55).

Firstly, Erving Goffman's theory in explaining social stigma.

Erving Goffman is a pioneer in interpreting social stigma, as he focused on the nature of stigma and how the stigmatized manage their damaged identity in their daily interactions. He believes that the self of the stigmatized person is built on their awareness of the information and conflicting expectations of those around them, and not necessarily on their violation of rules (Goffman, 1963: 5). For him, stigma is a reflection of the vision of others, and individuals become truly stigmatized when they accept this external view of them (Goffman, 1963: 6). He explains this by the occurrence of a conflict in the person's social identity resulting from the clash between society's expectations and their actual psychological behavior, which pushes them to be classified in a certain pattern. Here, the essential role of the surrounding environment in shaping and fixing the stigma becomes clear (Jalabi, 2011: 35).

The concept of identity:

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Identity has multiple dimensions, psychologically and socially. It represents an individual's sense of continuity, independence, and values derived from their experiences and body, provided that their stable self-image matches how others see them. Although modern transformations may threaten this identity and push people to unite with authority to escape the lack of it, Erikson sees the identity of the self as the individual's ability to determine their present and future, and to act as an independent and open entity (Abdul Rahman, 2010: 25).

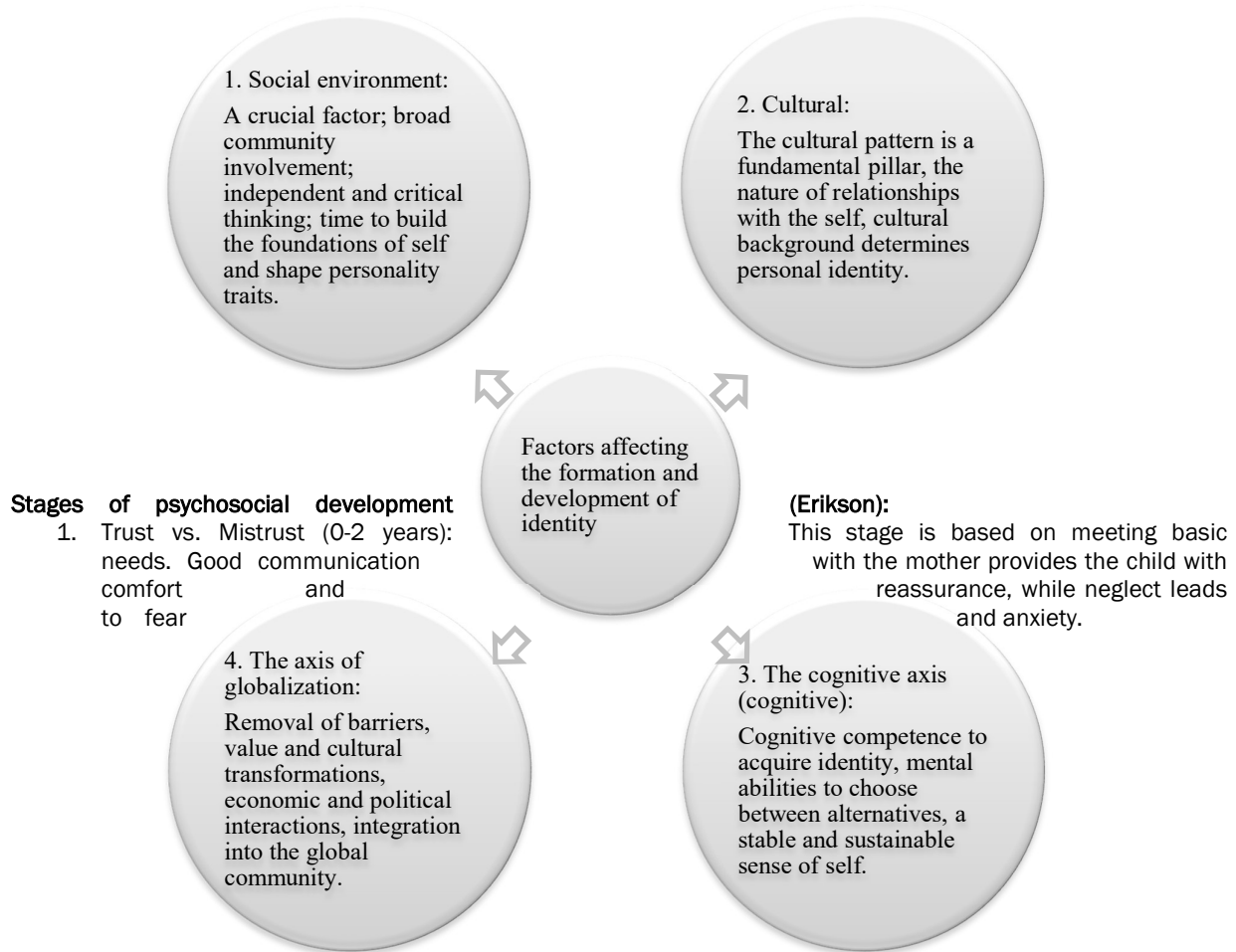
Erikson's theory of self-identity:

Erikson's theory is one of the theories that focused on explaining psychosocial development in general, and identity development in particular, with its two poles: identity crisis and role disturbance—identity realization. Through this, Erikson developed his theory, which focuses on psychosocial integration during adolescence.

Erikson adopted a different analytical approach in explaining the mechanisms of psychological development in individuals. Despite his profound influence from Freudian theory, he presented a different perspective that gives the social context in which the individual grows up a central and clear role in personality formation. Accordingly, Erikson emphasized the idea that socialization and the nature of the problems a person faces during successive stages of development contribute directly to shaping their identity. The results of this social interaction, whether positive or negative, are reflected in the course of their overall psychosocial development (Al-Zaghloul, 2006: 209).

Stages of self-identity formation:

Both Kafafi (2005: 17) and Mussin (1984: 523) believe that identity formation occurs through the intersection of four basic axes, as illustrated in the diagram below:



2. Independence vs. Doubt and Shame (2-4 years): The child begins to develop motor skills. A balance between firmness and trust fosters independence, while coercion and threats lead to the development of a shaky personality filled with doubt.
3. Initiative vs. Guilt (4-6 years): This is a stage of exploring abilities and asserting dominance through play. Positive role-playing develops self-esteem and initiative, while fear of punishment suppresses these energies.
4. Diligence vs. Inadequacy (6-12 years): The individual moves towards mastering skills and adhering to established rules. Achievement reinforces competence, while past failures deepen feelings of inferiority and inadequacy.

5. Identity Achievement vs. Identity Disruption (12-18 years): This is the core of development, as adolescents strive to form a stable self-image based on their past experiences. Failure at this stage leads to an "identity crisis" and a blurring of roles.
6. Intimacy vs. Isolation (Early Adulthood): This revolves around the ability to integrate one's personal identity with others in close, loving, and friendly relationships. The inability to build these bonds leads to social isolation and withdrawal.
7. Productivity vs. Stagnation (Midlife): This is linked to community engagement and responsibility towards future generations. Active contribution fosters personal strength, while self-absorption leads to feelings of stagnation and inertia.
8. Identity Integration vs. Despair (Old Age): This is a stage of wisdom and reflection on life's journey. The feeling that life has meaning achieves "self-integration," while failure in the preceding stages leads to despair and frustration upon facing the end (Erikson, 1982: 257-266).

Table (1)**Symptoms and manifestations of delinquency among juveniles (Shabram, 2016: 80)**

The outward appearance of delinquency	Aggressive and destructive acts
Psychological and emotional disorders	The delinquent suffers from a profound distortion in self-concept.
Cognitive deficits and control	He lacks foresight and therefore does not consider the consequences of his actions.
Mental abilities and physical characteristics	Reduced mental efficiency and cognitive activities
Slipping into crime	The drug user is driven to commit crimes.

Previous studies on social stigma:**Rabee (2017) Palestine, West Bank:**

(Social Stigma, Social Integration and Recidivism from the Perspective of Inmates of Correctional and Rehabilitation Centers returnees in the West Bank)

The study aimed to identify the vulnerable returnees towards the process of social stigma, to reveal the relationship between social stigma and their social integration and the possibility of their return to crime from the perspective of the returning victims. The sample consisted of 138 returning inmates from correctional and rehabilitation centers. The descriptive analytical method was used, and the study tool was a questionnaire. The results concluded that the social stigma imposed on those released affects their stability and contributes to the return of individuals to crime, a phenomenon that many released individuals in the West Bank suffer from (Al-Athamin, 2021).

(Schomerus et al., 2011, Germany:

(Self-Stigma in Alcohol Dependence: Consequences for Self-Efficacy in Refusing to Drink)

This study aimed primarily to explore the characteristics and stages of self-stigma among alcoholics and to understand the relationship between this stigma and the self-efficacy to refuse to drink, as well as the consequences of continuing to drink. To achieve this objective, the researchers adopted a descriptive, correlational, and comparative approach (a cross-sectional study). The study sample consisted of 153 patients with alcohol addiction who were receiving inpatient alcohol detoxification treatment. The researchers developed and adapted a tool based on the Self-Stigma Scale for Mental Illness, derived from Corrigan's model, to suit the alcoholic population. This tool was named the Self-Stigma Scale for Alcohol Dependence (SSAD). The study results revealed a strong correlation between the stages of self-stigma and mental illnesses such as depression. It showed that self-stigma and shame progress through sequential stages that ultimately lead to low self-esteem. Statistical analyses also revealed that a decrease in the consequences of drinking and self-stigma is directly related to the ability to control depressive symptoms. Furthermore, a clear correlation was found between increased self-stigma and the ability to control depressive symptoms. Self-stigma and decreased self-efficacy for refusing and abstaining from drinking, even after controlling for variables related to the duration and severity of alcohol addiction (Schomers, 2011).

Previous studies on self-identity:**Younis (2018):**

(The Identity Formation Crisis and its Relationship to Psychological Resilience among Kindergarten Teachers' Section Students)

The study aimed to reveal the nature of the relationship between the identity formation crisis, psychological resilience, and other variables among this group. To achieve this, the researcher adopted the descriptive analytical approach. The study was applied to a sample of (150) students and used measurement tools represented by: the identity crisis scale and the psychological resilience scale. The results of the study concluded that there is a correlational relationship between the level of identity crisis and psychological resilience among the sample members (Younis, 2018).

Adams et al. (1987)

(A study entitled The Relationship Between Identity Development, Shyness, Self-Awareness, and Self-Focusedness During Adolescence)

It aimed to find out the relationship between identity formation, self-awareness, and self-focus perception. The study was applied to a sample of high school students totaling (564) male and female students. It used instruments represented by the Ego Identity Scale, the Fantasy Scene Scale, and the Focused Identity

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Questionnaire. The results showed the presence of major effects of the identity status factor in the areas of personality, with no effect of the gender variable, except for a positive correlation between males and females in the identity awareness variable (Adams, 1978).

Research methodology:

The approach used in the current research is the descriptive approach.

Research community:

The research community represents a fundamental pillar in psychological research. It is defined as the total group of individuals who share certain characteristics that the researcher aims to study. The current research community is defined as (recovering female offenders from drug abuse) who are placed in correctional and rehabilitation institutions, and who have been sentenced by judicial rulings, and whose ages range between (12-18) years. The total number of the targeted community reached (67) recovering female offenders, who were counted after completing the administrative procedures and official approvals necessary to facilitate the researcher's task in the field (Daoud and Abdul Rahman, 1990: 66).

Research sample:

The researcher selected a stratified random sample to build the self-identity and social stigma scale. The sample for building the scale consisted of 67 recovering delinquents present in the juvenile reform department for the purpose of conducting the statistical analysis of the items of the two scales.

To achieve the research objectives, two measures were required:

Research tools:

1. Social stigma scale.
2. Self-identity scale.

Firstly / Social Stigma Scale:

To achieve the objectives of the current research, a social stigma scale was required. After reviewing the scales of previous studies, the researcher did not find a scale that suited her research sample. Therefore, the researcher worked on building a social stigma scale. The researcher sought to rely on Kaufman's (1963) theory of social stigma. The researcher built (42) items, and in front of each item were (5) alternatives (always, often, sometimes, rarely, never). After that, the researcher presented the scale items and its instructions to a group of experts and referees to judge its apparent validity. After taking into account the opinions of the experts and referees, all items were kept at a rate of 80%.

Secondly / Self-identity scale:

To achieve the research objectives, the researcher relied on adapting the Psychological Identity Scale prepared by (Al-Rababa'a, 1994), which was based in its construction and development on Erikson's theory of psychosocial development as a general theoretical framework. The scale was adapted in the current research, where the scale consisted of (44) items and (5) alternatives (always, often, sometimes, rarely, never) to be consistent with the characteristics of the sample of recovering female prisoners in the Iraqi environment, with a focus on the four identity states (investigation, suspension, closure, disturbance) as basic dimensions of the scale, in addition to using previous scales and studies in this field. The researcher presented the scale items to a group of experts and referees to judge its apparent validity, and after taking into account the opinions of the experts and referees, all items were retained at a rate of 80%, after which the researcher carried out the following procedures:

Statistical analysis of items on the social stigma and self-identity scale:

Paragraph discrimination index:

To verify the discriminatory power of the items of the (social stigma) and (self-identity) scales, the two scales were applied to the statistical analysis sample of (67) recovering delinquents, and by adopting the method of the two extreme groups (27% upper and 27% lower) and calculating the t-test value for each item, it was found that all items were statistically significant and discriminatory, as the t-values for the items of the social stigma scale were confined between (2.871 - 9.299), while for the items of the self-identity scale they were confined between (2.428 - 6.387). These indicators show that all items of the two scales distinguish between the two extreme groups well.

The relationship between the item score and the total score of the two scales:

To verify the construct validity and internal consistency of the items of the (Self-Identity) and (Social Stigma) scales, Pearson's correlation coefficient was calculated between the score of each item and the total score of the scale to which it belongs, on the statistical analysis sample of (67) recovered delinquents. When comparing the calculated correlation coefficient values with the critical value of the tabulated correlation coefficient of (0.235) at a significance level of (0.05) and with a degree of freedom of (65), the results showed that all the values of the item correlation coefficients with the total score of the two scales were statistically significant and positive, as the correlation coefficients of the items of the Self-Identity scale were limited to (0.298 - 0.570), while the correlation coefficients of the items of the Social Stigma scale with its different domains were limited to (0.241 - 0.671). Since all the calculated values are higher than the tabulated critical value, this confirms the quality of all the items of the two scales, their consistency, and their internal homogeneity in measuring the two targeted traits.

The correlation between the item score and the overall score for the domain to which it belongs, for the two scales (self-identity and social stigma):

To assess the internal consistency and construct validity of the study instruments, Pearson's correlation coefficient was calculated for each item's score relative to the total score of its respective domain on a pilot sample. By comparing the calculated values with the critical value of 0.235 at a significance level of 0.05 and with 65 degrees of freedom, the results were as follows:

- Social Stigma Scale: All 42 items showed statistically significant correlation coefficients exceeding the critical value. These values ranged from 0.412 to 0.693 in the social and family domain, from 0.395 to 0.676 in the psychological domain, and from 0.437 to 0.771 in the cognitive domain.
- Self-Identity Scale: The results showed that all 44 items showed statistically significant correlation coefficients exceeding the critical value. Correlation coefficients ranged from a minimum of 0.285 for item 30 to a maximum of 0.737. Maximum for paragraph (6).

Table (2)

Discrimination index for items on the self-identity scale and its correlation with the overall score in the domain

Paragraph no.	Scale area	Paragraph discrimination index	The paragraph's relationship to the overall score of the field
1	Identity verification	6.377	0.344
2	Identity verification	8.246	0.628
3	Identity verification	3.862	0.675
4	Identity verification	7.583	0.651
5	Identity verification	6.269	0.546
6	Identity verification	9.299	0.737
7	Identity verification	3.857	0.709
8	Identity verification	3.762	0.604
9	Identity verification	4.336	0.433
10	Identity verification	4.828	0.392
11	Identity verification	4.786	0.488
12	Suspending the decision	5.224	0.373
13	Suspending the decision	4.675	0.400
14	Suspending the decision	8.495	0.712
15	Suspending the decision	6.529	0.590
16	Suspending the decision	5.361	0.572
17	Suspending the decision	3.398	0.574
18	Suspending the decision	6.090	0.660
19	Suspending the decision	4.516	0.572
20	Suspending the decision	6.615	0.299
21	Suspending the decision	3.768	0.333
22	Suspending the decision	3.294	0.319
23	Identity closure	2,871	0.347
24	Identity closure	3.193	0.398
25	Identity closure	6.164	0.640
26	Identity closure	5.754	0.595
27	Identity closure	4.668	0.670
28	Identity closure	6.762	0.571
29	Identity closure	4.887	0.610
30	Identity closure	5.017	0.285
31	Identity closure	3.621	0.433
32	Identity closure	4.626	0.392
33	Identity closure	4.796	0.488
34	Identity disorder	4.884	0.592
35	Identity disorder	3.895	0.557
36	Identity disorder	5,915	0.658
37	Identity disorder	4.595	0.507

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38	Identity disorder	5.013	0.664
39	Identity disorder	6.873	0.615
40	Identity disorder	6.878	0.619
41	Identity disorder	5.204	0.643
42	Identity disorder	6.453	0.351
43	Identity disorder	4.346	0.357
44	Identity disorder	5.450	0.361

Table (3)
Discrimination criteria for items on the social stigma scale and their correlation with the overall score of the domain to which they belong

Paragraph no.	Scale area	Paragraph discrimination index	The paragraph's relationship to the overall score of the field
1	Social and family domain	3.196	0.552
2	Social and family domain	5.103	0.686
3	Social and family domain	2.903	0.526
4	Social and family domain	6.378	0.412
5	Social and family domain	3.145	0.582
6	Social and family domain	5.253	0.681
7	Social and family domain	4.507	0.573
8	Social and family domain	6.233	0.577
9	Social and family domain	2.851	0.580
10	Social and family domain	4.103	0.693
11	Social and family domain	4.413	0.648
12	Social and family domain	4.486	0.620
13	Social and family domain	2.832	0.529
14	Social and family domain	3.311	0.425
15	Psychological domain	3.800	0.513
16	Psychological domain	3.487	0.554
17	Psychological domain	4.299	0.560
18	Psychological domain	4.793	0.577
19	Psychological domain	6.068	0.676
20	Psychological domain	4.346	0.606
21	Psychological domain	3.912	0.595
22	Psychological domain	4.517	0.612
23	Psychological domain	3.784	0.550
24	Psychological domain	3.711	0.433
25	Psychological domain	3.011	0.478
26	Psychological domain	4.401	0.567
27	Psychological domain	5.175	0.395
28	Psychological domain	3.784	0.572
29	Cognitive domain	3.389	0.437
30	Cognitive domain	3.879	0.479
31	Cognitive domain	3.840	0.555
32	Cognitive domain	2.428	0.476
33	Cognitive domain	3.358	0.616

34	Cognitive domain	2.793	0.544
35	Cognitive domain	3.131	0.521
36	Cognitive domain	3.629	0.691
37	Cognitive domain	5.419	0.634
38	Cognitive domain	4.189	0.657
39	Cognitive domain	2.560	0.631
40	Cognitive domain	3.289	0.771
41	Cognitive domain	3.370	0.621
42	Cognitive domain	4.388	0.653

Psychometric properties:

The researchers verified the psychometric validity of the two instruments through indicators including construct validity, which was confirmed by the correlation of each item with the total score on the scale and the deductibles used in relation to the domains.

1. Validity:

Face Validity: The two scales (Self-Identity and Social Stigma) were presented in two different forms to a group of expert reviewers specializing in psychology and counseling. These reviewers provided feedback on the scope of the items, the clarity of their wording, and their relevance to the two variables. Based on the reviewers' opinions, a crossover was conducted (with experts evaluating 44 items) and (with experts evaluating 42 items) for the Social Stigma scale. Both scales achieved an occurrence rate exceeding 80%, indicating their face validity.

2. Reliability (Reliability):

The reliability of the instruments used in its survey was determined from the basic studies, where the researchers reached a consensus to prove the reliability of the self-passport measurement (0.802) and the social stigma measure (0.893), which are acceptable reliability values and confirm the possibility of the final test.

Thirdly / Statistical Methods:

To conduct the statistical analysis and extract the research results, the researcher used the Statistical Package for the Social Sciences (SPSS). The following statistical methods were employed, in accordance with the nature of the descriptive correlational approach:

1. Mann-Whitney U test to ensure equivalence of variables.
2. Kolmogorov-Smirnov test.
3. Pearson correlation coefficient.
4. One-sample t-test.
5. One-way ANOVA.

Research results:

The current research aims to:

1. Identify the social stigma among female offenders recovering from drug abuse:

To achieve the current objective, the researchers used a one-sample t-test to determine the significance of the difference between the mean responses of female offenders recovering from drug abuse and the hypothetical mean of the social stigma scale. The results are shown in table (4):

Table (4)

Significant results of the difference between the mean scores of the research sample and the hypothetical mean

Sample size	Arithmetic mean	Standard deviation	Hypothetical mean	Degree of freedom	T value		Significance level (0.05)
					Calculated	Tabulated	
67	177,164	11,791	126	66	35,518	1,99	Significant

Table (4) shows that the calculated t-value of (35.518) is greater than the critical t-value at a significance level of (0.05), which is (1.99). This indicates a statistically significant difference between the mean scores of female delinquents recovering from drug abuse on the social stigma scale and the hypothetical mean of the scale. This difference favors the sample's mean scores, indicating that the delinquents experience a high level of social stigma. The researchers attribute this high level of social stigma among the sample to several sociological and psychological factors, most notably the harsh stereotypical view and societal rejection of female delinquents and those recovering from addiction in particular. Society stigmatizes women with a moral and social stigma that is more difficult to erase than that imposed on men. This rejection and ostracism often extend to the immediate family and social circles, generating a persistent feeling of surveillance and discrimination among recovering women, as well as a loss of opportunities for integration and employment. This feeling of external stigma gradually transforms into an internalized self-stigma, causing the recovering woman to feel shame. Shame and the expectation of contempt from others, even if they show a sincere desire to change, and this result is logically integrated with the result of the first goal, as this sharp rise in social stigma is a major and direct cause of the decline in their level of self-identity. This result is consistent with studies that confirm that social stigma remains the biggest obstacle to the psychological stability of those recovering from deviant behaviors.

2. Identifying the level of self-identity among female offenders recovering from drug abuse:

To verify the current objective, the researchers used a one-sample t-test to determine the significance of the difference between the average responses of female offenders recovering from drug abuse and the hypothetical average of the self-identity scale, where the results were as shown in table (5):

Table (5)

Significant results of the difference between the mean scores of the research sample and the hypothetical mean

Sample size	Arithmetic mean	Standard deviation	Hypothetical mean	Degree of freedom	T value		Significance level (0.05)
					Calculated	Tabulated	
67	92	8,024	132	66	40,801	1,99	Significant

Table (5) shows that the calculated t-value of (40,801) is greater than the tabulated t-value at a significance level of (0.05) of (1.99), which means that there is a statistically significant difference between the average scores of the recovering delinquents on the self-identity scale and the hypothetical mean of the scale. This difference is in favor of the hypothetical mean of the scale, which indicates a low level of self-identity among the recovering delinquents. The researchers attribute this result to the fact that the recovering delinquents go through a critical stage of psychological and social instability after recovery. The harsh experience associated with delinquency and substance abuse leads to identity fragmentation, a feeling of loss, and a lack of positive purpose in life. Moreover, the negative societal view and the stigma associated with substance abuse and delinquency weaken their self-confidence and hinder their ability to rebuild a stable and integrated self-identity, which makes them live in a continuous identity crisis.

3. The significance of differences in self-identity among female offenders recovering from drug abuse is determined according to the social status variable.

To determine the significance of differences in self-identity among female offenders recovering from drug abuse according to the social status variable, the researcher calculated the arithmetic means for each case for the members of the main research sample, as shown in table (6):

Table (6)

The arithmetic mean and standard deviation of the social status variable

Marital status	N	Mean	Standard Deviation
Married	14	95,7143	3,45139
Single	15	94,9333	3,51460
Widow	20	92,5500	4.39467
Divorced	18	86,0556	12.34538
Total	67	92,0000	8.02458

To determine the significance of the differences between the means, the researcher used one-way analysis of variance, and the results were as shown in table (6-1):

Table (6-1)

Results of one-way ANOVA to determine the significance of the difference according to social status

Tabulated F value	F	Mean Square	DF	Sum of Squares	
2,76	6,163	321,438	3	964,315	Between Groups
		52,154	63	3285,685	Within Groups
			66	4250,000	Total

The results shown in table (6-1) indicate that the calculated F-value at a significance level of (0.05) is greater than the critical F-value. This suggests differences in self-identity among female offenders recovering from drug abuse according to their marital status. This difference favors married women, indicating that they possess a higher level of self-identity compared to other cases. The researchers attribute this result to the crucial role of family and social stability in rebuilding the self-identity of recovering women. Married and single women often receive a form of social support or supervision, along with daily responsibilities, which help them restore their self-image and form a positive and stable self-identity after their recovery journey. In contrast, separated (divorced) and widowed women face double the pressures. In addition to the recovery crisis and the stigma of their past delinquency, they suffer from the loss of their partner, social exclusion, or family disintegration. This complex psychological and social burden makes them more susceptible to identity fragmentation, feelings of persecution, or isolation, which explains their lower self-identity scores. They have a significant advantage compared to other groups.

4. The significance of differences in social stigma among female offenders recovering from drug abuse is determined according to the social status variable.

To determine the significance of differences in social stigma among female offenders recovering from drug abuse according to the social status variable, the researcher calculated the arithmetic means for each case for the members of the main research sample, as shown in table (7):

Table (7)
The arithmetic mean and standard deviation of the social status variable

Marital status	N	Mean	Standard Deviation
Married	14	170,2857	13,95834
Single	15	174,2000	14,06211
Widow	20	179,9000	9,12429
Divorced	18	181,9444	7,43183
Total	67	177,1642	11,79188

To determine the significance of the differences between the means, the researcher used one-way analysis of variance, and the results were as shown in table (7-1):

Table (7-1)
Results of one-way ANOVA to determine the significance of the difference according to social status

Tabulated F value	F	Mean Square	DF	Sum of Squares	
2,76	3,638	451,731	3	1355,192	Between Groups
		124,159	63	7822,002	Within Groups
			66	9177,194	Total

The results shown in table (7-1) show that the calculated F-value at a significance level of (0.05) is greater than the tabulated F-value, which means that there are statistically significant differences in social stigma among female offenders recovering from drug abuse according to the social status variable. This difference is in favor of the separated women, which indicates that the separated women have a higher level of social stigma compared to other cases. The researchers explain this result by noting that the harsh societal views and pressures surrounding women vary and intensify according to their family status. The results showed that recovering delinquents from the category of (divorced and widowed women) are the most affected by social stigma. This is because these groups face a compound or double stigma in our societies. They suffer first from the stigma of previous delinquency and substance abuse, and second from the negative and stereotypical traditional societal view of divorced or widowed women, who are often subject to constant social scrutiny and blame. Furthermore, they lack a supportive partner to defend or protect them from the judgments of their surrounding environment. In contrast, we find that recovering (married) women feel the least social stigma. The researchers explain this by stating that the presence of a husband and the support of the family represent a social and psychological safety net for the recovering woman. The acceptance of the partner contributes to her reintegration and reduces the severity of external judgments against her, making her feel safe and less sensitive to the opinions of others. This result clearly reveals a direct relationship between the absence of family support (such as divorce and widowhood) and the severity of social stigma. The growing sense of stigma and social exclusion among recovering women necessitates rehabilitation programs that take into account the social and family privacy of each group.

5. Understanding the relationship between self-identity and social stigma among female offenders recovering from drug abuse:

To determine the relationship between self-identity and social stigma among female delinquents recovering from drug abuse, the researchers used Pearson's correlation coefficient, and then tested the value of the correlation coefficient using the t-test, where the results were as shown in table (8):

Table (8)
Results of the relationship between self-identity and social stigma among female offenders recovering from drug abuse

Sample size	Correlation coefficient value	T value		Significance level (0.05)
		Calculated	Tabulated	
67	-0,641	6,727	1,96	Significant

Table (8) shows a statistically significant inverse correlation between self-identity and social stigma at a significance level of (0.05). This means that the higher the value of social stigma, the lower the value of self-identity. In other words, the higher the level of social stigma among delinquents, the lower their level of self-identity. The researchers emphasize the existence of a strong inverse relationship between society's negative view (social stigma) and the recovering woman's view of herself. When society makes prejudices, rejects the recovering woman, and stigmatizes her with shame, this creates environmental pressure that hinders her adjustment and integration. This rejection negatively affects her psychological structure, leading to a decline in her self-confidence, a disturbance in her self-esteem, and a decrease and fragmentation of her identity. Because of this stigma, the

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recovering woman is deprived of the ability to build a new, valid identity, and finds herself forced to remain a prisoner of her previous deviant identity. Scientific results confirm that the decrease in self-identity coincides directly with the increase in social stigma, which means that treating identity disorders in recovering women can never succeed without reducing the severity of the negative societal view and providing a supportive environment that accepts change and helps them with it.

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