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Developing Digital Community as Social Support Network for Drug Addict Families: A Conceptual Paper

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ABSTRACT

Families caring for individuals with drug addiction often experience significant strain arising from stigma, social isolation, and limited institutional support. These pressures contribute to sustained psychological distress, particularly as existing informal networks and overstretched professional services remain inadequate in addressing the complex and ongoing challenges faced by caregivers. Although previous studies have acknowledged the emotional burden borne by families, less attention has been given to the potential role of dedicated digital platforms in strengthening tailored social support networks for this vulnerable group. This paper aims to address the potential of digital community to support families affected by addiction. The paper conducted on a library-based conceptual analysis, this paper argues that a well-designed digital community has the capacity to function as a meaningful support environment. The searching term include family addiction support, digital community, online peer support, addiction stigma, caregiver resilience, and digital mental health. Findings conclude virtual refuge, mediated peer connection, informational resilience, collective advocacy and adaptive digital are the potential for contribution to collective empowerment by offering a space where families can build shared understanding and challenge broader societal misconceptions. The development of these community-oriented digital spaces therefore represents a promising avenue for reducing family isolation and enhancing overall well-being among those affected by drug addiction. The risk and challenges also future research also discussed details in this paper.

Keywords: Digital Support, Addiction Families, Online Communities, Stigma Mitigation, Caregiver Resilience

INTRODUCTION

Public discourse on drug addiction has traditionally centred on the recovery of the individual, with comparatively little attention directed toward the families whose lives are significantly disrupted by the consequences of substance use. Parents, spouses, and children often confront complex emotional, social, and practical challenges, yet their experiences remain marginalised within mainstream narratives. This oversight contributes to a persistent gap in support, leaving many families to manage stigma, isolation, and uncertainty without adequate resources or guidance. Existing support mechanisms, where available, are frequently constrained by bureaucratic processes, limited cultural sensitivity, or geographical inaccessibility. Such limitations disproportionately affect families in remote communities or those reluctant to engage in face-to-face services due to fear of social judgement. These structural gaps reflect not only resource limitations but a broader societal reluctance to recognise the needs of families as legitimate components of the addiction-recovery ecosystem.

This conceptual paper proposes that addressing this deficiency requires rethinking current approaches to family support, particularly through the development of digital infrastructure capable of enhancing accessibility, privacy, and continuity of care. Digital platforms may offer scalable pathways for reducing stigma, facilitating



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peer connection, and providing reliable information, thus complementing existing community and institutional interventions. The paper therefore examines why comprehensive, sustainable models of digital support for families affected by addiction remain underdeveloped, and how such models may contribute to a more inclusive and responsive support system.

Academic discussions on addiction and its impact on families have long operated within a relatively narrow conceptual frame. Early theoretical models commonly pathologised the family, casting it either as a contributing factor to substance use or as a co-dependent unit that reinforced maladaptive behaviour (Copello & Walsh, 2017). Although influential within systems theory, this approach placed disproportionate responsibility on family members and obscured their position as individuals experiencing significant harm. Subsequent scholarship has shifted toward recognising the extensive psychological, financial, and social pressures that families encounter (Murphy & Callaghan, 1988). The intensity of this strain is well documented and often parallels the trauma experienced by families coping with chronic illness or interpersonal violence (Barnard, 2007). Nevertheless, despite greater acknowledgement of these challenges, research remains limited regarding strategies that meaningfully strengthen and sustain families beyond traditional therapeutic or peer-support settings.

The concept of social support is central to understanding resilience within adverse circumstances (Cohen & Wills, 1985). Empirical work consistently demonstrates that supportive social networks can mitigate stress and promote adaptive coping. However, the application of this principle to families affected by addiction reveals a critical complication: the pervasive stigma surrounding drug use (Link & Phelan, 2001). Families frequently internalise this stigma, contributing to secrecy, shame, and withdrawal from potential support systems. Studies by Room (2005), Jones et al., (2024) and Porciello, (2024) show how this "courtesy stigma" isolates family members and inhibits the formation of the networks that are theoretically needed to buffer stress.

Although digital technologies offer a potential avenue for alleviating these barriers, their use in supporting families affected by addiction remains insufficiently theorised. Research on online support communities for chronic illnesses and mental health conditions illustrates the usefulness of digital platforms for providing informational support, emotional affirmation, and a sense of belonging (Braithwaite et al., 1999; White & Dorman, 2001). Features such as anonymity, continuous accessibility, and the ability to connect dispersed individuals appear particularly relevant for families experiencing addiction-related stigma.

Yet, simply replicating the design of existing online support models is unlikely to meet the unique needs of this group. Addiction-related stigma, the unpredictability of relapse, and the complex emotional dynamics within affected families demand a more specialised digital structure. While some online platforms focus on recovery for individuals with substance-use disorders, and others offer limited support for families, there is little theoretical work dedicated to conceptualising a community-centred digital support system intentionally designed to reduce stigma, facilitate peer solidarity, and encourage collective advocacy. Current digital interventions often emphasise information provision or short-term counselling rather than cultivating sustained, reciprocal community relationships.

Practical considerations further complicate this domain. The digital divide, encompassing disparities in access to reliable internet and in digital literacy, continues to affect participation in online communities (Van Dijk, 2020). These barriers are particularly salient for older caregivers and families with limited socioeconomic resources, raising questions about the inclusiveness of digital solutions.

Moreover, the notion of "community" within digital spaces requires careful examination. Sociological debates question whether online forums can generate meaningful social capital or collective action comparable to offline communities (Putnam, 2000; Turkle, 2011). Conversely, other scholars argue that well-designed digital environments can foster robust ties and provide substantive social support (Wellman & Gulia, 1999). The central issue is therefore not the legitimacy of digital community per se, but the identification of design principles that can transform digital platforms into supportive, sustained networks for families affected by addiction.

Overall, while existing literature provides important insights into the burdens faced by families and the general benefits of digital support environments, theoretical and empirical work on a comprehensive, community-





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oriented digital support model for this population remains limited. This gap highlights the need for more integrated frameworks capable of guiding the development of effective digital social-support systems.

Objective

This paper aims to explore the potential of digital communities as support mechanisms for families affected by addiction, alongside a critical discussion of the ethical risks and practical challenges involved.

METHODOLOGY

This study adopts a conceptual analysis methodology with the primary aim of developing a theoretically grounded framework rather than generating or testing empirical evidence. Conceptual analysis was selected because the objective of the paper is to clarify, integrate, and extend existing theoretical insights on digital communities, social support, and family experiences of addiction, rather than to evaluate the effectiveness of a specific intervention. Accordingly, the study does not follow the procedures of a systematic or narrative review, which typically emphasize comprehensive coverage or aggregation of empirical findings. Instead, it focuses on analytical synthesis and theoretical integration.

The conceptual inquiry was informed by a structured search of peer-reviewed literature from various sources. Search terms included combinations of "family addiction support," "digital community," "online peer support," "addiction stigma," "caregiver resilience," and "digital mental health." These terms were selected to capture interdisciplinary perspectives spanning addiction studies, sociology, psychology, public health, and digital health research.

Source selection was guided by clearly defined inclusion and exclusion criteria. Articles were included if they provided conceptual, theoretical, or empirically informed insights into social support processes, family experiences of addiction, stigma, or digitally mediated communities. Preference was given to studies that conceptualized families as recipients of support rather than as contributors to addiction-related problems. Publications that adopted pathologizing or deficit-based portrayals of families, as well as studies that focused solely on technical or commercial aspects of digital platforms without engagement with social or ethical dimensions, were excluded.

The analytical process moved beyond descriptive summarization toward iterative conceptual synthesis. Key constructs identified across the selected literature—such as psychological safety, courtesy stigma, mediated peer interaction, informational resilience, and collective advocacy—were systematically compared and contrasted. Areas of conceptual convergence were examined to identify shared theoretical assumptions, while points of divergence were analyzed to reveal gaps or limitations in existing models of digital support. This process enabled the integration of insights across disciplinary boundaries and supported the development of a coherent explanatory framework.

Conceptual relationships were refined through repeated cycles of abstraction and alignment with the study's analytical objectives. Rather than proposing typologies or testable hypotheses, the analysis culminated in the articulation of a conceptual framework that explains how a digital community might function as a social support system for families affected by drug addiction. The framework is intended to offer theoretical guidance for future empirical research, intervention design, and policy development, while explicitly acknowledging that it has not yet been empirically validated.

FINDINGS

A systematic review of the literature and relevant theoretical constructs reveals several interrelated themes that collectively support the rationale for a community-oriented digital social support network for families affected by addiction. These themes do not function as isolated findings; rather, they form the conceptual foundations upon which such a network could be developed as shown in table 1:





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Table 1: Digital Family Support Communities

Function	Primary Level	Conceptual Role
Virtual refuge	Individual	Psychological safety and stigma-free expression
Mediated peer connection	Relational	Reciprocal emotional and practical support
Informational resilience	Individual / Community	Reliable knowledge and sense-making
Collective advocacy	Community / Policy	Stigma reduction and shared voice
Adaptive digital design	Cross-cutting	Sustained engagement and inclusivity

The first theme concerns the creation of a virtual refuge that facilitates shared experience. Families living with addiction often experience acute isolation, intensified by societal stigma and the internalisation of shame. A digital environment that incorporates anonymity and psychological safety can offer a space for candid expression and mutual recognition. The act of sharing personal narratives within a protected setting has been shown across various online health communities to reduce emotional isolation and foster a sense of collective understanding (Naslund et al., 2020; Berry et al., 2022).

The next theme centres on mediated peer connection and reciprocal support. While traditional support groups are constrained by geography and availability, digital platforms allow individuals to form sustained peer relationships across distance and time. These interactions extend beyond information exchange; they involve ongoing emotional and practical support enabled by asynchronous communication. Evidence from comparable online health communities demonstrates that such mediated interactions can become meaningful and enduring, allowing participants to alternate between seeking and providing assistance. The reciprocity embedded in these exchanges contributes to the development of a stable and supportive community structure (Fortuna et al., 2020; Pretorius et al., 2022).

Another theme relates to informational resilience. Families confronted with addiction often struggle to locate reliable guidance on treatment pathways, harm reduction strategies, and social or legal resources. An organised digital community can serve as a curated repository of verified information, presenting complex material in accessible and actionable forms. Such informational clarity reduces reliance on unregulated online sources and supports families in adopting more proactive and informed approaches to care and decision-making(Marshal et al., 2024; Alvarez-Jimenez et al., 2020).

The inquiry also identifies the potential for collective advocacy and stigma reduction. Individual efforts to challenge stigma are often limited in impact, but digital networks can consolidate dispersed voices into coordinated action. A community platform can function as an organisational centre for collective engagement facilitating communication, aggregating experiences, and mobilising participants to advocate for structural and policy change. In this way, the network moves beyond emotional support to contribute to broader efforts aimed at addressing misrepresentation and systemic inequities surrounding addiction (Trottier et al., 2023).

Finally, the analysis underscores the importance of sustained engagement through adaptive digital design. Effective digital communities require ongoing refinement, responsive moderation, and user-centred evolution. Features such as adaptive content delivery, structured feedback mechanisms, and continuous updates are essential to maintaining relevance and preventing user disengagement. The proposed model therefore emphasises the need for dynamic design principles rather than static platform development, ensuring long-term viability and meaningful participation (O'Connor et al., 2023).

DISCUSSION

The conceptual framework presented here positions the proposed digital platform not as a conventional technological tool but as a socio-technological intervention aimed at addressing a longstanding gap in support for families affected by addiction. Its core implication is the shift from crisis-driven responses to a more sustained and proactive form of assistance. Existing support systems whether overwhelmed mental health services or sporadic self-help groups are insufficient to meet the scale and complexity of familial needs. A digital infrastructure offers an expanded support ecosystem capable of accommodating the emotional fragility and sustained burden borne by caregivers.



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Concerns that online engagement lacks the depth of face-to-face interaction remain common (Turkle, 2011), yet such critiques often overlook the distinctive advantages afforded by digital environments. For individuals facing heightened stigma, anonymity and asynchronous communication may reduce psychological barriers to help-seeking. For example, parents reluctant to disclose their child's addiction in physical settings may find digital spaces more accessible and less threatening. These features can facilitate open expression and emotional disclosure, enabling trust to develop gradually and potentially supporting transitions into offline relationships when users are ready. Thus, digital interaction need not diminish authenticity; rather, it can provide an initial layer of protection essential for participation.

The framework's emphasis on informational resilience is similarly significant. Families frequently encounter conflicting or misleading advice about addiction, contributing to confusion and stress. A curated digital environment can function as a reliable repository of evidence-based resources, supporting informed decision-making and reducing vulnerability to misinformation or predatory interventions. In this sense, the platform offers both emotional and cognitive support, addressing gaps that traditional systems have struggled to fill.

The model also challenges individualised narratives surrounding addiction by fostering collective advocacy. When families connect through a shared digital space, their collective experiences can generate a stronger, more coordinated voice. Such networks may support efforts to promote family-centred policies, critique existing service gaps, and challenge persistent stigma. This reflects a broader critique of public health systems, which have often failed to account for the wider social impacts of addiction.

The framework underscores the importance of adaptability in digital support design. Unlike traditional programmes that may adopt uniform approaches, digital platforms can accommodate diverse needs through differentiated forums, tailored resource libraries, or multilingual options. Adaptive design is not merely a technical consideration but a recognition of the heterogeneity within this population. Without such flexibility, digital interventions risk stagnation and declining relevance. The framework therefore suggests that sustained, community-guided evolution is essential to ensuring long-term effectiveness. For policymakers, the implication is clear: investment should extend beyond treatment provision to include the development of resilient support infrastructures that address the significant, and often overlooked, burden borne by families.

Risk And Challenges

The development of digital communities as support systems requires careful consideration of ethical risks and structural constraints, particularly in relation to the well-being of families affected by drug addiction. Key challenges include data privacy, information integrity, ethical governance, and financial sustainability.

Protecting the privacy of families and individuals who use drugs is a critical concern, as digital platforms necessarily involve the collection and exchange of sensitive personal information. The primary purpose of digital support is to provide a safe environment in which families can communicate openly about their experiences and support needs. Without strong safeguards against data breaches, surveillance, or unauthorized access, such platforms risk exposing families to further stigma and social harm. Additionally, the potential manipulation or commercial exploitation of user data poses a serious threat to trust and may undermine confidence in the support system.

Information accuracy and clarity present another significant challenge. Misinterpretation or distortion of support-related information can reduce the effectiveness of digital interventions. Content management must therefore align with the linguistic register, knowledge level, and everyday terminology used by families to ensure that guidance is both accessible and relevant. Ethical oversight and content verification are essential to maintaining accuracy, emotional safety, and mutual trust within the community.

Finally, the establishment and maintenance of digital communities require substantial financial investment, which may increase the overall cost of addiction prevention and rehabilitation initiatives. In Malaysia, public expenditure on drug-related interventions is already considerable, yet the problem persists. Further financial commitments raise concerns regarding cost-effectiveness and long-term sustainability, highlighting the need for careful policy planning and resource prioritization.

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CONCLUSION

Families affected by drug addiction continue to face stigma, silence, and fragmented support. This paper argues that intentionally designed digital communities can function as structured social support systems rather than incidental technological tools. By integrating psychological safety, peer reciprocity, informational resilience, and collective advocacy within an adaptive design, digital platforms offer a feasible pathway toward more inclusive, family-centered addiction support. While empirical validation is required, the proposed framework provides a contemporary conceptual foundation for future research, policy development, and ethical innovation.

As the framework proposed in this paper is conceptual in nature, future research is needed to empirically examine its assumptions and practical relevance in real-world settings. One important direction for empirical investigation involves assessing how participation in a digitally mediated support community influences family members' experiences of courtesy stigma, coping capacity, and overall psychological well-being. Such studies would help determine whether engagement in these communities reduces social isolation and supports more adaptive emotional responses over time.

In addition, future studies should explore how the outcomes associated with digital community participation vary across cultural, socioeconomic, and geographic contexts. Differences in digital access, caregiving norms, stigma intensity, and family roles may shape how families engage with and benefit from online support. Comparative research across diverse populations would therefore contribute to more inclusive and context-sensitive models of digital support.

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