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COMPARATIVE STUDY OF PERSONALITY PROFILE OF OPIATES AND NON-OPIATES:

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ABSTRACT

The study was conducted to make a comparison between male opiates and nonopiates residing in various rural and urban areas of Kashmir division. In this study, the questionnaire developed by Hans. J. Esyneck (EPI) consists 90 items was used to identify the different dimensions of personality. Psychoticism: Solitary, insensitive and egocentric, Extroversion: - Sociable, outgoing and optimistic. Neuroticism: - Moody, touchy, anxious and restless. The study reflects that opiates have low frustration tolerance for unsatisfactory conditions are neurotically fatigued, easily annoyed and emotional. They are suspicious and are often involved in their own ego, interested only in their own mental life. They are unconcerned about other people and are poor in team work. These people tend to worry and to feel anxious over difficulties and are not able to meet the demands of life, they tend to follow their own impulse and do not act according to the values or out of a sense of duty. In this study, the comparison is made between how an addict's brain is different from the non - addict brain. The aim of the study was to compare the personality traits associated with the use of drug like opium (Papaver-somniferum). A plant of the family (Papaveraceae) such as morphine, codeine and heroin acts upon the central nervous system and produces physical dependence and addiction. The habitual use of opium produces physical and mental deterioration and shortens life. An acute overdose of opium causes respiratory depression which can be fatal.

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Introduction

A person's characteristic way of responding are often referred to as his or her personality. Personality differs both complex & unique in that individual greatly from one another in multiple components of behavior. Most people's personality style doesn't affect their behavior similarly in many situation. personality styles may be maladaptive, if an individual is unable to modify his or her behavior. When the environment undergoes significant changes that call for different approaches. If personality characteristics are not flexible enough to allow an individual to respond adaptively to at least an ordinary variety of situations a disorder may be present.

When personality styles become pathological, they can impair an individual's functioning important situation and can lead to anxiety, a feeling of distress and unhappiness.

One of the most famous psychologists "Allport G.W" who defined personality in a most comprehensive way. According to him, "personality is the dynamic organization within the individual of that psycho-physical system that determines his unique adjustment to his environment".

Personality is not a fixed state but a dynamic totality, which is continuously changing due to interaction with the environment. The way in which individual adjust to his environment is personality. It is organization of internal and external activities. Individual affects another individual through his personality in short, personality is the total quality of the structure. Attitudes, interests, capacities and behavior pattern which are manifested in man's relation with the environment.

1.1 Understanding drug:

Many people don't understand why or how other people become addicted to drugs. They may mistakenly think that those who use drugs, lack moral principles or will power and that they couldn't stop their drug use simply by choosing to. In reality drug addiction is a complex disease, quitting usually takes more than good intentions/ strong will. It changes the brain that making quitting harder.

1.2 What is drug addiction?

Addiction is a chronic disease characterized by drug seeking and use that is compulsive, difficult to control, despite harmful consequences. The initial decision to take drugs is voluntary for most people, but repeated drug use can lead to brain changes



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that challenges an addicted persons selfcontrol and interfere with their ability to resist interfering urges to take drugs. Their brain changes can be persistent, that is why drug addicted is considered a relapsing disease. People in recovery from drug use disorders are at increased risk of returning to drug use even after years of not taking drugs.

It is common for a person to relapse, but relapse does not mean that treatment does not work. As with other chronic health condition, treatment should be ongoing and should be adjusted on how the patient responses. Treatment plan needs to be revived often and modified to fit the patients changing needs.

Addiction is a disease that affects the brain and behavior. When a person is addicted to drugs, he cannot resist the urge to use them, no matter how much harm the drug may cause.

Drug addiction is not just heroin, cocaine or other illegal drugs, but one can get addicted to alcohol, nicotine, upload pain killer and other legal substances.

At first, a person may choose to take drug because he like the way it makes to feel, he may think he can control how much and how often use it but over time drugs change how the brain works. These physical changes can last for a long time and makes a person to lose selfcontrol and can lead to damaging behavior.

1.3 Addiction Vs Abuse:

Drug abuse is when a person uses legal or illegal substances in the way that he should not. He may take more than the regular doze of pills or use someone elses prescription. He may abuse drugs to feel good, ease stress or avoid reality.

Addiction is when a person cannot stop, not when it puts his health in danger, but also causes financial, emotional and other problems.

1.4 What happens to the brain when a person takes drugs?

Brain is wired to repeat experiences that make feel good, so we are motivated to do them again and again.

The drugs that may be addictive target brain's reward system. They flood brain with a chemical called dopamine and this triggers a feeling of intense pleasure and keeps taking the drug to chase that high. Over time, when the brain gets used to the extra- dopamine, it may need to take more of the drug to get the same good feeling. When a person uses drugs for a long time, it can cause changes in the other brains chemical system and circuits as well as like



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- a) Judgment
- b) Decision making
- c) Memory
- d) Ability to learn.

Together these brain changes can drive to seek out and take drugs in ways that are beyond a person's control.

2. Method:

2.1 Sample:

The study was planned to explore the trait profile of substance abusers. The sample consisted 60 male opiates and 60 normal subjects who never used psychotropic drugs and maintained healthy physical life were selected by matching the variables i.e. age, sex, education, and marital status. In this method, general psychiatric unit (O.P.D) of drug deaddiction center, Police Control Room Srinagar was approached to furnish data and all substance abusers satisfying certain criteria of substance abuse were selected for study. The inclusion criteria were a period of drug intake which was more than six months, registered patients at the OPD, substance dependence was diagnosed by concerning psychiatrist according to the International Classification of Diseases, 10th revision (1992) and have a minimum age of 18 years and belonging from the Districts of Baramulla, Srinagar and Anantnag.

2.2 Procedure:

Approval was obtained from the Inspector General (I.G) Police Control Room before approaching patients in drug de-addiction center. The participants were given a brief overview of the study and asked to sign an informed consent form that explained the of purpose the study and assured confidentiality. The respondents filled up questionnaires in the presence of the researcher and required approximately 50 minutes to complete.

Ethical consideration: Participants were treated in accordance with the Indian Council of Medical Research (ICMR) and American Psychological Associations (APA) ethical guidelines.

2.3 instruments:

In addition to a socio-demographic, questionnaire developed by a researcher which was divided into socio-demographic and clinical data sheet.

The variations in socio-demographic sheet were named, age, sex, educational



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qualification, occupation, marital status, religion, residence, family income and family type.

The variables on clinical data sheet were the age of onset, type of drug, frequency and severity, last use, any abstinent attempt any family history was asked.

A questionnaire developed by Hans. J. Esyneck- a British borne psychologist was used to identify the different dimensions of personality. It consists of 90 items and are 3 levels reflecting the different dimensions of personality

- a) Psychoticism: Solitary, insensitive and egocentric.
- b) Extroversion: Sociable, outgoing and optimistic.
- Neuroticism: Moody, touchy, anxious and restless.

The scoring key for E.P.Q (R) was used to check the responses of subjects. The key was placed in the booklet visible through the circles on the key. The scores psychoticism, extraversion and neuroticism was obtained by using this key. One score was added for each answer visible through the squares and was recorded in the table on page 1st.

3. Result:

Descriptive analyses were used to explore the association between the variables. Mean, standard deviation and t-test were used for statistical analysis by using (Spss) version 10.1

A view of the table 1 shows that there is a significant difference between skepticism score of opiates and non-opiates because (t=3.02) value to reach the significance level criteria.

A view of the table 2 shows that there is no significance difference between the mean extraversion score of opiates and non-opiates because (t=1.347) value fail to reach the significance level criteria.

A view of the table 3 shows that there is a significance difference between neuroticism score of opiates and non-opiates because (t=6) value to reach the significance level criteria.



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Table 1-Mean scores, SDs and t-value of PENscores of opiates and non-opiates.

scores of opiaies and non-opiaies.					
Personality	Opiates		Non-		t-
dimension			opiates		valu
	Mean		Mean		e
	Deviation		Deviation		
	Standard		Standard		
Psychoticis	5.81	1.9	4.60	2.4	3.02
m		0		0	
Extra-	11.1	5.03	12.1	3.1	1.34
version	1	2	6	2	7
Neuroticis	14.8	2.87	11.68	3.1	6
m	6			2	

4 Discussion:

The result of the present study demonstrated that substance abusers had significantly scored higher on psychoticism and neuroticism as compared to non-substance abusers. Substance abusers were more anxious, hostile, vulnerable to stress and depressive traits. The findings also consistent with earlier studies which showed that opiates had more higher neurotic tendencies than non-opiates (Dorus and Senay.1980) (Skinner and Allen.1982). High N

is associated with irrational ideas, reduced impulse control and poor adjustment of stress (Costa Mc-Crae.1992)

Much theoretical explanation had vein used to explain the high anxiety level among substance abusers. One of the most prominent work done in this area was Esyneck's Three Dimensional Theory of Personality Esyneck 1979 put forward the idea that the biological basis of neuroticism originates from the sensitivity of the limbic autonomic system which determines our reactivity to environmental and psychological stimuli. Highly reactive individuals are typically easily agitated. These individuals may be expected to use the addictive substance for their calming and rewarding effects.

No significant difference in extraversion scores of opiates and non-opiates were an unexpected results despite that the extraverts had a strong nervous system that is relatively quick to inhibit excessive stimulation. They readily tune out the arousing imports from social situations and can tolerate having a lot of activity. They crave such stimulation and their behavior governed with stimulation seeking behavior (Esyneck.1985). because of their low level of cortical arousal they need more stimulation for maintaining an optimal level of



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arousal hence they used addictive substance as a form of stimulation.

The dimension of extraversion has been associated with activity, sociability, risk taking behavior and impulsivity (Costa and Mc-Crea.1992). The idea that impulsivity may be characterized by a lack of behavioral constraint, a lack of caution, possibly even a failure to conform to conventional moral expectations. Drug use and abuse are strongly discouraged by conventional cultural standards risk activities because of their illicit nature, individuals who are low on constraint might be at increased risk of drug abuse because they are less likely to accept and be less fearful of the consequences, failing to follow cultural norms governing drug abuse (Esyneck 1979)

There is an interesting convergence of thinking on the relationship between reward drive and spontaneous impulsiveness in the development and maintenance of substance misuse. Individuals prone to abuse drugs have been found to have lower levels of Dopamine concentration in neural pathways than those individuals less prone to abuse drugs.

5. Conclusion:

It concluded that drug users show highest neurotic tendencies and emotional instability than non drug users. They are more hostile, anxious and vulnerable to stress than non drug users.

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