

Original Article

The Correlation between Emotional Intelligence and Instable Personality in Substance Abusers

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Abstract

Background: Substance dependence has recently turned into one of the most important social problems. Clinical findings have shown personality traits, social relations, attitudes and values, along with emotional intelligence factors such as emotions, feelings, emotions management, challenging with problems, problem solving, tolerating psychological pressure, impulse control, self esteem and interpersonal relations, to affect substance dependence. Consequently, understanding the meaning and developing tools for assessment of emotional intelligence are significantly vital in human psychological health. This study aimed to investigate the relation between emotional intelligence and instable personality in substance abusers.

Methods: The present correlational study selected 80 male addicts through available sampling. The subjects referred to the Therapeutic Community Center and Kimia, Yas, and Aban Clinics in Yazd, Iran. Their emotional intelligence and personality were evaluated by BarOn questionnaire and Eysenck personality questionnaire (EPQ) for adults, respectively. Pearson's correlation coefficient was used to assess the correlations between different factors.

Findings: There was a negative significant correlation ($P = 0.050$) between emotional intelligence and instable personality in substance abusers. Problem solving and optimism ($P = 0.001$), interpersonal relation ($P = 0.010$), self esteem ($P = 0.013$), and realities ($P = 0.017$) had significant effects on instable personality.

Conclusion: Based on our findings, emotional intelligence was significantly correlated with instable personality in substance abusers. However, using more accurate tools in order to assess all aspects of personality can give better results.

Keywords: Emotional intelligence (EI), Instable personality, Substance abuse.

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Introduction

Addiction is a social, health, economic and cultural harm and problem that has influenced the future sovereignty and security of countries.¹ In addition to physical and mental problems for addicted individuals, it would also endanger the socioeconomic and political status of countries.² Iran has a young population among which more than 50% age under 20 years. Urban citizens constitute 62% of the population under 20 years of age. The primary formal assessments revealed the number of substance addicts and drug abusers to be around 2 million people (about a million and 200 thousand people permanent addicts and 800 thousands as recreational users).^{1,3,4} Given that each of such individuals has a 5-member family, an estimated number of 10 million people would be closely involved in addiction-related problems and difficulties. In addition, 70% of substance abusers are married and 86% of married addicts have children.^{1,4}

Currently, the widespread use of illegal drugs and alcohol has made western communities in a breakdown so that the American presidential candidate at the early 90s called this phenomenon as "home chemical war".²

Despite the profound cultural changes in lifestyle and modernisms in today's world, many people still lack the necessary skills in dealing with life issues. Thus, they are vulnerable and incapable in coping with daily life problems. Studies showed that most of the health problems and mental-emotional disorders have a social-emotional infrastructure. For instance, many social harms such as suicide, drug addiction, criminal behavior and mental disorders are resulted from low self-esteem, inability to express the feelings and lack of assertiveness as well as lack of communication skills.⁵ Strong social functioning, particularly interpersonal communication, as well as constructive interaction with others in many different ways can help people improve their mental health. Therefore, it seems emotional intelligence (EI) is of determinative and effective factors in most human reactions toward social environment. EI is a different concept from cognitive intelligence and includes recognizing feelings and their correct application, proper emotional decision-making, ability to manage the desired mood, controlling the impulses and also appropriate social skills. EI can be considered as one of the important and

satisfying aspects in dealing with daily life events. A study by Delavarpoor et al. showed that EI is correlated with general health, optimism, stress, marital life satisfaction, social compatibility, anger management, self-efficacy and new problem solving.⁶ Moreover, low EI is correlated with aggression, depression, addiction and crime because such issues indicate individual's inability to cope with emotion.⁷

Very few conducted studies regarding the EI functioning and substance abusing indicated negative correlations between low EI and alcohol, tobacco consumption, and smoking.⁷

In addition, tendency toward drugs involves various individual, family and social factors. Among individual factors, some personality traits of drug addicts are effective in forming addiction. Some of personality traits that make people susceptible to drug abuse are self-harming behaviors such as self-injury, frustration intolerance and aggression, suggestibility, feelings of inferiority, a sense of urgent approval of others, having the history of antisocial behaviors, introversion, idealism, perfectionism, anxiety, low self-esteem, impulsivity, curiosity, inability to cope with problems and adaptation with them, low self-expression and inability to say "No" to others, inability for effective communication and social problem-solving as well as personality disorders such as antisocial personality disorder, mood disorders including unpredictability and unstable mood and emotional instability. Emotional instability is a series of behaviors causing problems in terms of individual and social adaptability.⁷

According to a study by Ghoreishizadeh and Torabi, an extensive part of narcotics substance abusers age 25-34 years and 80% of them use narcotics. The most common disorders in axis I are depression (67%) and anxiety disorder (36%) while the most common disorder in axis II is antisocial disorder (41%). Psychological pathology is one of the common outcomes in drug addiction and has an important role in etiology, prognosis and treatment of drug dependency.⁸

Genetic, physical, social and cultural factors associated with psychiatric disorders, such as anxiety and personality disorder, have been approved to be effective on initiating and increasing drug dependency. Studies have suggested that individuals with substance

dependency show more symptoms of mental pathology and disorders compared to non-drug abusers. The most prevalent disorders among drug abusers are major depressive disorder and personality disorder.⁹

Therefore, it is clear that different personality factors are correlated with drug abuse. Furthermore, some of these traits are closely related to emotions and how to apply them (as EI) in order for effective coping strategy in life.

A comparison was also made between the frequency of disorders among single and multiple drug abusers.⁴ The results generally indicated that in most cases, personality disorders were correlated with drug abuse. In addition, multiple drug abusers were more at risk to suffer from personality disorders.⁴

EI is predicted to have positive correlations with extraversion, empiricism, adaptation and conscientious and totally with stable behavior and emotion. On the contrary, it is thought to have negative correlations with neuroticism and instability and accordingly substance abuse.¹¹ Therefore, the present study was aimed to determine the correlation between EI and personality instability among substance abusers in the province of Yazd, Iran.

Methods

This descriptive, correlational study was conducted in 2010 and aimed to determine the correlations between EI and personality instability and substance abuse. A total number of 80 male individuals with substance abuse disorders who referred to Addiction Therapeutic Community (TC), as well as Kimiya, Yas and Aban Clinics in Yazd, Iran, were selected using convenient sampling method. After obtaining informed consents and assuring the confidentiality of the results, subjects were assessed based on the DSM-IV diagnostic criteria. Moreover, the participants were informed about the study objectives after implementation of the questionnaires.

In this study, two questionnaires were used for data collection. The first questionnaire was the Eysenck personality questionnaire (EPQ) including 57 questions in 3 scales of *E*, *N* and *L* respectively standing for *extraversion*, *neuroticism* and *lying* models. It also has some questions about age, occupation, marital status and education along with research-related questions

such as type of substance used as Yes/No responses. The second questionnaire was the BarOn emotional-social intelligence (ESI) test with 117 questions and 15 scales including emotional self-awareness, self-regard, self-esteem, assertiveness, independence, empathy, social responsibility, interpersonal relations, reality testing, flexibility, problem solving, stress tolerance, impulse control, optimism and happiness. The responses were calculated based on a 5-point Likert scale (completely agree, agree, somehow agree, disagree and completely disagree). The Cronbach's alpha coefficient for this test has been reported to be 0.93. In addition, the results obtained from standardization showed that the test had an appropriate validity and reliability (0.88).

Individuals who had used substance for less than a year were excluded from the study. Data analysis was performed through Pearson's correlation coefficient using SPSS software.

Results

In order to investigate which of the EI components (emotional self-awareness, self-regard, self-esteem, independence, interpersonal relations, reality testing, impulse control, optimism, and problem solving) are effective in instability of personality. Regarding the significant of P value, problem solving was significant at the 0.050 level of significance, being optimistic at the level of 0.001 and interpersonal relations 0.017, which had respectively the highest portion of dependent variable differentiation (instability of character). The entire variable in this model could represent 46.9% variance, which was significant (Table 1).

Discussion

The findings of this study indicated a significant fully negative correlation between instability and EI in substance abusers. In other words, stability had a positive significant correlation with EI, i.e. individuals with higher EI showed more stable, less dangerous behaviors. The negative correlation between EI and personality instability was predictable due to the conceptual similarity of emotional stability and EI subscales, particularly emotional management and control, as well as the positive correlation between EI and emotional stability. On the other hand, the ability to manage emotions, as one of the EI

Table1. The effects of emotional intelligence components (emotional self-awareness, self-regard, self-esteem, independence, interpersonal relations, reality testing, impulse control, optimism, problem solving and impulsivity) on instability based on multiple linear regressions.

| | Components | β | Error | T | P | R | R ² | R ² _{adj} |
|--------------------|-------------------------|---------|-------|-------|---------|-------|----------------|-------------------------------|
| | Fixed | - | 0.945 | 16.26 | < 0.001 | | | |
| | Interpersonal relations | -0.180 | 0.014 | 2.80 | 0.010 | | | |
| | Impulse control | 0.100 | 0.016 | 1.42 | 0.157 | | | |
| | Problem solving | -0.210 | 0.018 | 4.10 | < 0.001 | | | |
| Instability | Self-awareness | 0.063 | 0.018 | 1.06 | 0.290 | 0.422 | 0.478 | 0.469 |
| | Impulsivity | 0.041 | 0.018 | 0.62 | 0.536 | | | |
| | Self-regard | 0.049 | 0.018 | 0.67 | 0.504 | | | |
| | Self-esteem | -0.160 | 0.011 | 2.28 | 0.013 | | | |
| | Reality testing | -0.140 | 0.010 | 2.10 | 0.017 | | | |
| | Optimism | -0.230 | 0.008 | 4.45 | < 0.001 | | | |

components, can indicate its positive correlation with adaptability trait. Considering the obtained results from the study variables, their correlation on each other can be explained as:

Considering the obtained results, instability can be suggested to include imbalanced mood, unstable behavior, neuroticism, weakened emotional self-awareness, assertiveness, self-esteem, interpersonal relationships and flexibility. Thus, instable individuals cannot have the necessary control on their emotions and feelings. Consequently, their social responsibility, commitment, will and accuracy would be decreased and dangerous behaviors such as substance abuse and antisocial behaviors would be increased. Therefore, having the EI components can be considered as a protective factor against the onset of substance use and abuse. Furthermore, having a certain and stable orientation in behavior would result in the development and authenticity of individual and social life. Subsequently, the ability for problem solving, stress tolerance and assertiveness would be strengthened in individuals and high-risk behaviors, such as substance abuse or antisocial behaviors would be replaced by developed behaviors such as mental tolerance, problem-solving and goal-oriented behaviors.¹¹

The abovementioned results were in complete accordance with the findings of Mashhadi et al.¹² and Hassani et al.¹³ and in partial accordance with the results reported by Garoosi et al.,¹⁴ Ehteshamzade et al.¹⁵ and Jazayeri et al.¹⁶

Previous studies have suggested multiple correlations between emotional instability, aggressive and antisocial behaviors and substance use.⁷ Other studies have also indicated a significant correlation between EI components and personality processes when considering the

psychological adjustment.¹⁷

Previous researches have shown that coping skills and emotional intelligence, affect general health.¹⁸ They increase the ability of individuals in dealing with stress and environmental stresses and promote self-regard, self-efficacy and general health. Therefore, it can be concluded that high EI and accordingly coping skills might lead to substance use avoidance.¹⁹

Moreover, EI, as a part of social intelligence, determines the ability of an individual in confrontation and adaptability with mental stress. EI (also referred to as EQ) has important applications in treatment or formation of behavior dysfunctions particularly for behavioral disorders.²⁰ According to some studies, EI and mental health are significantly different between normal and addicted people.²¹

Since low EI is associated with lower ability to cope with and manage emotions, it is effective on the onset of drug abuse. In fact, when an individual is stimulated by friends to use drugs and is under the pressure of peers, emotion management is one of the EI components that reduces the risk of substance use. In cases that an individual with low EI tends to use substance due to inability to cope with mental stress and life stresses and to make decisions, substance abuse can be considered as an immature defense mechanism in dealing the problems.²² Such mechanisms sometimes act on the individual's behavior unconsciously.¹⁷

Other studies have indicated a significant correlation between low EI and borderline personality disorder (hopelessness, impulsivity, instability and stress-related paranoid symptoms). Thus, EI is considered as a predictor of borderline personality disorder's symptoms.²³ Furthermore, multiple psychiatric disorders

and multiple substance abuse have unlimited and extensive factors and effects with little prognosis. Very few studies available have shown an 84% correlation between multiple substance abuse and multiple personality disorders, i.e. single substance abusers showed lower personality disorders.¹⁰

A strong correlation has also been reported between anxiety disorder and substance abuse and bipolar disorder. Simultaneous concurrence of substance abuse and bipolar disorder increases the duration of hospitalization and increases the severity of disorder. It also causes antisocial behaviors, committing suicide, suicidal thoughts, unstable behaviors and emotions, non-response to treatment and low quality of life as well as non-development in life. Although some studies have shown of the correlation between substance abuse and bipolar disorder to be 7.2%, others even reported a higher correlation.²⁴

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EI is known to be a part of personality structure. On the other hand, personality is a framework in which EI acts. Therefore, EI should always be considered as a more comprehensive part of personality.¹¹

Totally, we found a full correlation between EI (assessed by Bar-on test) and instability (assessed by Eysenck personality questionnaire). However, since several family, individual, social and situational factors may influence substance use, other studies are suggested to review personality considering more scales to assess the maximum number of factors using high validity and reliability instruments.

One of the limitations of this study was the low number of participants and non-cooperation or lack of cooperation of some subjects due to some cultural biases.

Conflict of Interest: The Authors have no conflict of interest.

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بررسی رابطه‌ی هوش هیجانی با بی‌ثباتی شخصیت در سوء مصرف کنندگان مواد

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چکیده

مقدمه: وابستگی به مواد مخدر یکی از معضلات جوامع می‌باشد که در ایجاد آن ویژگی‌های شخصیتی، روابط اجتماعی، نگرش و باورها و همچنین مؤلفه‌های هوش هیجانی مانند احساسات، هیجانات، مدیریت هیجان‌ها، نحوه مقابله با مسایل، حل مسأله، تحمل فشار روانی، کنترل تکانه، ابراز وجود و روابط میان فردی نقش مهمی ایفا می‌کند. از این رو، مفهوم هوش هیجانی و تلاش برای ساخت ابزار سنجش آن، بیانگر اهمیت تأثیر آن در سلامت روانی است. در این پژوهش، رابطه هوش هیجانی با بی‌ثباتی شخصیت در سوء مصرف کنندگان مواد بررسی شد.

روش‌ها: این پژوهش یک مطالعه همبستگی بود که با روش نمونه‌گیری در دسترس از ۸۰ نفر از معتادان مرد مرکز کمیته درمان اعتیاد و کلینیک‌های کیمیا، یاس و آبان شهرستان یزد به عمل آمد. هوش هیجانی بیماران توسط مقیاس هوش هیجانی، بار منفی آن و شخصیت آن‌ها توسط پرسش‌نامه‌ی شخصیت Eysenck بزرگ‌سالان و با استفاده از شاخص آماری ضریب همبستگی Pearson تجزیه و تحلیل شد.

یافته‌ها: هوش هیجانی با بی‌ثباتی شخصیت در سوء مصرف کنندگان مواد ارتباط معنی‌دار و همبستگی کامل منفی داشت ($P = 0/050$). در مؤلفه‌های حل مسأله، خوش بینی ($P = 0/001$)، روابط بین فردی ($P = 0/010$)، عزت نفس ($P = 0/013$) و واقع گرایی ($P = 0/017$) به ترتیب بیشترین سهم را در قدرت تبیین متغیر وابسته (بی‌ثباتی شخصیت) دارا بودند.

نتیجه‌گیری: هوش هیجانی با بی‌ثباتی شخصیت در سوء مصرف کنندگان مواد رابطه دارد. پیشنهاد می‌شود از ابزار دقیق‌تری برای سنجش همه جانبه شخصیت برای رسیدن به تشخیص قاطع استفاده شود.

واژگان کلیدی: هوش هیجانی، بی‌ثباتی شخصیت، سوء مصرف مواد.

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