

## Personality Traits and Readiness to Change among Drug Addicts in Malaysia

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**Abstract:** Readiness to change is a crucial issue in the treatment of drug addiction. Therefore, understanding the personality traits of drug addicts may give an indication of their readiness to receive treatment and change this addictive behavior. This study was conducted to examine the predictive relationship between personality traits and readiness to change among drug addicts in Malaysia. The study employed survey research involving the administration of two standardized psychological tests which were the Eysenck Personality Questionnaire Revised Short Version (EPQ-RS) and the Stages of Change Readiness and Treatment Eagerness Scale (SOCRATES). A total of 599 respondents in six rehabilitation centers in Malaysia participated in this study. Data were analyzed using Pearson correlation and multiple regressions. Results showed that there were significant correlations between personality traits of neuroticism and psychoticism with all the three stages of readiness to change. Findings from multiple regression analysis indicated that neuroticism and psychoticism predicted significantly Recognition, Ambivalence and Taking Steps. The findings indicated that personality traits were significant predictors of readiness to change among drug addicts in Malaysia.

**Key words:** Personality, readiness, change, drug addiction, neuroticism, psychoticism

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### INTRODUCTION

The scenario of drug addiction has caused chronic social problems in many countries. In Malaysia, drug addiction has become a national problem for many years and this epidemic has continued for decades. The total number of drug addicts in Malaysia traced from 1988 to March 2006 was 292,696 (Fauziah and Naresh, 2009). This formidable figure corresponds to greater than 1% of the total population in Malaysia. The epidemic causes unnecessary loss to family, society and country. The country not only loses financially due to rehabilitation and treatment programs but also loses its asset for human resource development. Efforts to eradicate drug abuse have become the main agenda of the country. In fact, the government has announced a drug-free agenda by the year 2015.

According to the statistics provided by the National Anti-Drugs Agency (NADA), the rate of success for rehabilitation for community cases in 2005 showed only 32.6% drug addicts have successfully free themselves from drug addiction after getting treatment from Serenti drug treatment and rehabilitation program (AADK, 2006). The question that emerges with drug addicts that have

successfully free themselves from addiction is what are the main characteristics that can be used as a guideline for other people such as other drug addicts, rehabilitation institutions, parents and community. Numerous studies have been conducted to examine the factors, profile and problems of drug addiction. However, few studies to date have been done to discover what are the personality tendencies of the addicts who have successfully free themselves from addiction. Therefore, this research was carried out to identify the personality profile of inmates in rehabilitation centers and the traits that have the highest prevalence in the motivation to change from addictive behavior.

**Personality and drug addiction:** Studies of personality profiles of heroine addicts using Eysenck Personality Questionnaire (EPQ) (Eysenck and Eysenck, 1975) showed that they have different personality profiles from subjects who were not drug addicts (Blaszczynski *et al.*, 1985; Gossop and Eysenck, 1980; Nishith *et al.*, 1994). Gossop and Eysenck (1980) who used EPQ-Addiction Scale showed that the personality of polydrug users (in which majority of them reported that they preferred heroine) can be differentiated with the personality of a

normal control group. Drug addicts were found to obtain significantly high scores in Psychotism (P) and Neuroticism (N) scales but obtained significantly low scores in Extraversion (E) and Lie scales (L). The same findings were obtained by Blaszczyński *et al.* (1985) who studied a group of heroine addicts in Australia and also by Gossop and Eysenck (1980) who studied 221 drug addicts.

In another study by Mann *et al.* (1995) using NEO Personality Inventory (Costa and McCrae, 1992) on drug addicts and a control group, they found that the personality traits of these two groups were different with drug addicts obtaining significantly low scores in Agreeableness (A), Conscientiousness (C) and Extraversion (E) scales and high scores in Neuroticism (N) scale (Mann *et al.*, 1995). The scales of A and C were found to have negative correlations with P scale for EPQ (Eysenck, 1999). Therefore, the results from Mann *et al.* (1995)'s study also showed that personality traits of drug addicts were similar with past studies. As such, it can be concluded that as a group, drug addicts tended to have neurotic, psychotic, introvert personality traits and have a low tendency to conform to social desires compared to the control group that did not use drugs (Rosenthal *et al.*, 1990).

According to Eysenck (1999) also, the P scale was among the scale that was most related significantly with addictive behavior. In addition, Gossop and Eysenck (1980) suggested that both P and N scales were important in differentiating between individuals who were addicted to drugs and those who were not addicted. Studies have also found that the personality patterns of drug addicts mimic the personality of criminals (Eysenck and Gudjonsson, 1989) and gamblers (Blaszczyński *et al.*, 1985) in which these three groups were found to display significantly high P and N traits. Generally, high P trait indicated the characteristics of impulsivity, failure to give attention and disorganized personality. A high N trait on the other hand showed negative and unstable emotions and tended to experience psychological disorders and have negative morality (Eysenck, 1999). Gossop and Eysenck (1980) also suggested that high scores in N scale showed that polydrug users tended to experience anxiety and depression.

**Readiness to change:** According to the findings by Gossop *et al.* (2006), readiness to change and outcomes of drug addiction after treatment showed that the results failed to support the expected hypothesis that the steps taken were related with reduced use of drugs after treatment. There was no significant relationship between steps to change with use of substance or extended

influence after treatment. A negative relationship was found in the steps to change taken and Bensedrine abuse. Readiness to change was related with use of heroine and scores of psychiatric symptoms at treatment. It was assumed that almost 90% addicts treated at Serenti centers relapsed after completing treatment.

Prochaska and Di Clemente (1984) in their article have said that psychology has made important developments in exploring the role of motivation in rehabilitation from drug addiction and dependence since the past 20 years. Although, rehabilitation is complicated due to physiological and psychological dependence, the intentions and motivations of drug addicts is a critical part in building it. Motivation to change plays a role in the process of establishing the need for change, getting treatment and achieving change.

A study by Frausto and Hejazi (2009) identified patients in emergency department in their readiness to change their addictive behavior and those who were 18 years old and used single drug were found 46% were not ready to change their drug dependency behavior, 21% felt uncertain and 33% were found to be ready to change.

Fields (2007) examined how far the hypothesis that said measure of motivation to change was related with baseline characteristics such as depression, stress, seriousness of addiction, anxiety and hostility. Motivation to change was measured using the University of Rhode Island Change Assessment (URICA) consisting of Readiness to Change (RTC) and Committed Action (CA). A study on 200 veterans that received rehabilitation treatment found that motivation to change has negative relationship with emotional suffering and seriousness of problem.

Specifically, the purpose of this study was to find the relationship between personality traits and readiness to change among individuals involved in drug addiction. In addition, this study aimed to identify the significant predictors of readiness to change of drug addicts from these three personality traits. The following hypotheses were formulated to guide this research: There is significant relationship between personality traits of extraversion, neuroticism and psychoticism with readiness to change. Readiness to change is significantly predicted by extraversion, neuroticism and psychoticism.

## MATERIALS AND METHODS

This study employed a survey design in which two standardized questionnaires were administered. A total of 599 rehabilitees from six drug rehabilitation centres agreed to participate in this research.

The instruments used were two standardized psychological tests which were:

- Eysenck Personality Questionnaire Revised Short Version (EPQ-RS). The questionnaire consists of 48 items using binary format, yes or no. It measures four scales which are Neuroticism, Extraversion, Psychoticism and Lie
- The Stages of Change Readiness and Treatment Eagerness Scale (Socrates). Socrates is a psychological measurement to measure three subscales which are Recognition, Ambivalence and Taking Steps

The Eysenck Personality Questionnaire-Revised Short Version (EPQ-RS) was reported to have good reliability for all subscales between 0.76-0.90 (Eysenck *et al.*, 1985). The Stages of Change Readiness and Treatment Eagerness Scale (Socrates) was also reported to have good alpha reliability between 0.60-0.88 for Ambivalence, 0.85-0.95 for Recognition and 0.83-0.96 for Taking Steps (Miller and Tonigan, 1996). In addition, test retest reliability also showed high values of 0.82 for Ambivalence, 0.88 for Recognition and 0.91 for Taking Steps.

The research was conducted by first getting the permission from National Anti Drugs Agency (NADA). Once approval was obtained, the researchers administered the questionnaires to participants identified by officials in the drug rehabilitation centers. Instructions were given to participants and items were explained to participants when necessary. All the completed questionnaires were then collected by researchers.

The data were keyed in and analyzed using Statistical Package for Social Sciences (SPSS). Statistical analyses employed were Pearson correlation and multiple regression analysis.

**RESULTS AND DISCUSSION**

The findings in this research for all the hypotheses were presented here. Hypothesis 1 was formulated to examine the relationship between personality traits of extraversion, neuroticism and psychoticism with readiness to change. Results in Table 1 showed that there were significant and positive correlations between neuroticism and Recognition, Ambivalence and Taking Steps. This meant that the higher the scores of neuroticism which indicated emotional stability the higher the readiness of rehabilitees to change. On the other hand, there were significant and negative correlations between psychoticism and Recognition, Ambivalence and Taking Steps. The lower scores in psychoticism indicated that the rehabilitees have higher readiness to change. However, there was no significant correlation between extraversion and all three stages of readiness to change.

The second hypothesis is readiness to change is significantly predicted by personality traits. Multiple

Table 1: Correlation between personality and readiness to change

Personality traits	Recog.	Ambiv.	T. steps
Extraversion	-0.008	-0.043	0.006
Neuroticism	0.177*	0.195*	0.133*
Psychoticism	-0.149*	-0.169*	-0.178**

\*p<0.001

Table 2: Multiple regression analysis between neuroticism, psychoticism and recognition

Model	B	SE	Beta	t
Constant	23.26	0.63	-	36.66*
Neuro	0.28	0.06	0.18	4.50*
Psycho	-0.40	0.11	-0.15	-3.76*

\*p<0.05

regression analysis was conducted to examine the contribution of extraversion, neuroticism and psychoticism towards Recognition, Ambivalence and Taking Steps. Of particular importance were the personality traits that significantly predicted Taking Steps because this indicated those rehabilitees who were identified to have high motivation to change. The regression model showed that neuroticism and psychoticism predicted significantly Recognition with 5% variance,  $R^2 = 0.05$ ,  $F(2, 593) = 17.06$ ,  $p<0.05$ . The linear equation that can be formulated is:

$$Y = 23.26+0.28(\text{Neuroticism})-0.40 (\text{Psychoticism})$$

Neuroticism was a significant predictor with Beta = 0.18,  $t = 4.50$ ,  $p<0.05$ . Similarly with Psychoticism which also significantly predicted Recognition with Beta = -0.15,  $t = -3.76$ ,  $p<0.05$ . The results are shown in Table 2.

The regression model also showed that neuroticism and psychoticism predicted significantly Ambivalence with 7% variance,  $R^2 = 0.07$ ,  $F(2, 593) = 21.38$ ,  $p<0.05$ . The linear equation that can be formulated is:

$$Y = 14.57+.20(\text{Neuroticism})-0.30 (\text{Psychoticism})$$

Neuroticism was a significant predictor with Beta = 0.20,  $t = 4.97$ ,  $p<0.05$ . Similarly with Psychoticism which also significantly predicted Ambivalence with Beta = -0.17,  $t = -4.29$ ,  $p<0.05$ . The results are shown in Table 3.

Finally, the regression model also showed that neuroticism and psychoticism predicted significantly Taking Steps with 5% variance,  $R^2 = 0.05$ ,  $F(2, 593) = 15.79$ ,  $p<0.05$ . The linear equation that can be formulated is:

$$Y = 32.99+0.29 (\text{Neuroticism})-0.65 (\text{Psychoticism})$$

Neuroticism was a significant predictor with Beta = 0.14,  $t = 3.39$ ,  $p<0.05$ . Similarly with Psychoticism which also

Table 3: Multiple regression analysis between neuroticism, psychoticism and ambivalence

Model	B	SE	Beta	t
Constant	14.57	0.41	-	35.48*
Neuro	0.20	0.04	0.20	4.97*
Psycho	-0.30	0.07	-0.17	-4.29*

\*p<0.05

Table 4: Multiple regression analysis between neuroticism, psychoticism and taking steps

Model	B	SE	Beta	t
Constant	32.99	0.86	-	38.19*
Neuro	0.29	0.09	0.14	3.39*
Psycho	-0.65	0.15	-0.18	-4.50*

\*p<0.05

significantly predicted Taking Steps with Beta = -0.18, t = -4.50, p<0.05. In this subscale, Psychoticism is the stronger predictor as compared to Neuroticism. The results are shown in Table 4.

### CONCLUSION

When we examined the results of correlation, the readiness to change was correlated significantly and positively with neuroticism indicating rehabilitees need to have emotional stability in order to have the motivation to change. At the same time, the significant and negative correlation between Psychoticism and readiness to change means that rehabilitees have less tendency for depression, paranoid, anxiety which are traits that characterize psychopathological symptoms.

Regression analyses showed that neuroticism and psychoticism contributed significantly towards readiness to change. Specifically, the significant contribution was highest in the subscale of Ambivalence. This meant that they were still unsure whether they can control their addiction but they were open to reflection.

This pattern of significant prediction was similar in both Recognition and Ambivalence with Neuroticism as the stronger predictor compared to Psychoticism. However, in the stage of Taking Steps, Psychoticism was the stronger predictor compared to Neuroticism. This finding indicated that the trait of Psychoticism or tendencies for psychopathological symptoms must be low in order for rehabilitees to start taking steps in changing their addiction.

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