Abstract

Objective: This study was an attempt to predict potential for drug abuse on the basis of three predictors, namely parenting style, stress, and type D **Method:** personality. descriptive-correlational study, 200 students (100 males and 100 females) of Islamic Azad University of Karaj selected by convenience sampling. For data collection. perceived parenting styles questionnaire, perceived stress scale, type D personality scale, and addiction potential scale were used. Results: The results showed that rejecting/neglecting parenting style emotional support positively and negatively correlated with addiction potential, respectively. **Conclusion:** The child-parent relationship and also the relationship between stress and type D personality can be considered as predictive factors in addiction potential.

Key words: Parenting Styles, Stress, Type D Personality, Addiction Potential

Potential for Drug Abuse: Predictive Role of Parenting Styles, Stress and Type D Personality

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Introduction

Addiction, as one of the four main crises of the twenty-first century, is considered one of the major health, mental, and social problems as well as the most important factor effective in risk behaviors (Farnam, 2013). About 205 percent of universtivy students has been involved in addiction due to various psychological and social problems (Bahadori Khosroshahi & Khanjani, 2013; Sarrami, 2012). Addiction is dependence on the substances whose repeated use with a specified quantity and at certain times is necessary for the user and leads physical and psychological dependence (American Psychological Association, 2013) and also causes the creation of a phenomenon named tolerance in the body (Bazmi, 2011). Addiction is described as a set of defense and adaption mechanisms that begin from the beginning of adolescence and are stabilized with the compatibilities of adulthood (Johnson, 2003). Several factors are involved in the development of drug trends from the beginning of adolescence. In accordance with self-regulation theory, Zinberg (1984) emphasized the imbalance of "ego" in drug-dependent persons and their inability to maintain the independence of the "ego" and believed that drug dependent people lose the nutrition sources of environmental stimuli, establish destructive relationships with family and others, and their perceptions of the outside world become more negative. Kohut (1971) believed that the major damage to the addicts' personality is the result of severe failures and negative experiences in relation with the mother and the failure in the adjustment of actions and tensions. This leads to the establishment of an inefficient mental structure in the internal regulation of their acts and behaviors. In scientific literature, this issue has been frequently researched under the title of parenting styles. Parent-child interaction is accomplished in two dimensions, namely admission evaluation (including supporting and fostering positive affect between parent and child) and control (including guidance and monitoring the child's behavior). Emotional warmth against hostility (neglect, rejection, and violence) is the most effective dimension of parent-child relationship and the base of the formation of one's future experiences (Amato & Fowle, 2002). Baumrind (1967) considered both dimensions of responsiveness vs. unresponsiveness and demanding vs. undemanding and, then, introduced three styles as authoritative parenting (reasonable expectations by creating logical constraints, expressions of love, and the participation of children in decision-making), authoritarian parenting (onerous and unrealistic expectations, use of punishment and coercion, lack of attention to the emotional needs), and permissive parenting (not expecting children and weakness in control of child's demands). Young, Klosko & Weishaar (2003) also introduced several parenting styles characterized by deprivation, overprotective parenting, belittling perfectionist parenting, pessimistic/fearful parenting, controlling parenting, emotionally inhibited parenting, and conditional/ narcissistic parenting. The quality of mother-child relationship and all aspects of it (role confusion, positive affect, communication and replication) are involved in adolescents' addiction potential (Farahati, 2012). Violent and authoritarian relationship, tendency to delinquent behavior, symptoms of depression, anxiety, and phobia are also prevalent in drug users that verify the role of parent-child interaction styles in the tendency of children to malicious behavior (Ra'easi, Anisi, Yazdi, Zaman & Rashidi, 2008; Goudarzi, Zarnaghash & Zarnaghash, 2004; Parker & Benson, 2004; Havasi, 2001; Shokrzadeh, 2013; Andersson & Eisemann, 2003; Zeinali, Vahdat & Gharehdingeh, 2010, Seifi Gandomani, Saffarinia & Kalantari Meybodi, 2013).

Such experiences in childhood are mainly determinant of the structure of one's personality and predict his/her behavioral model in subsequent periods (Bazmi, 2011). Several studies have confirmed the relationship between personality traits such as introversion, incompatibility, and neuroticism and high-risk behaviors such as smoking, alcohol consumption, and substance use. (Aderam & Nikmanesh, 2011; Kornor & Nordvik, 2007; Janery & Kan, 2012, Eshratifard, 2012: Ahmadi, Najafi, Husseini Almadani & Ashoori, 2012: Erfani & Poorsina, 2012). The existence of the vulnerable personality and serious problems of personality, such as narcissism, antisocial behavior, and borderline personality in drug abusers has also been approved (Bond, 2005, cited in Baron-Oladi, Navidian and Kaveh-Farsani, 2013; Sarason & Sarason, 1994; Mohamadzadeh & Aghayi, 2005). Some studies have also confirmed the intensification of mental and personality disorders after addiction (Ketabi, 2009), potential type D personality or frustration by a combination of two fixed personality constructs, including negative affect and social inhibition for tendency to addiction (Grossarth-Maticek & Eysenck, 1990), and lower tendency to health-related behaviors (Broek, Martens, Nyklicek, Voort & Susanne, 2007; Williams, et al., 2008; Whitehead, Perkins-Porras, Strike, Magid & Steptoe, 2007).

In addition to the quality of interactions with parents and the consequent experiences in terms of personality traits, a variety of social, economic and psychological stresses are the underlying factors leading to potential for drug addiction (Samoo'ea, Ebrahimi, Mousavi, Hassanzadeh & Rafi'ea, 2000). Goeders (2004) considered tendency to drug as a mechanism aimed at overcoming stressful life factors or reducing the symptoms of anxiety and depression. Studies are also indicative of the inability to cope with stressors in terms of tendency to substance use (Pourseyedmoosayi, Mousavi & Kafi, 2012; Hyman, Fox, Hong, Doebrick & Sinha, 2007; McCuller, Sussman, Dent & Teran, 2001; Ghasemi, Rabie, Haghayegh & Palahang, 2011; Banna, Back, Do & See, 2010; Garland, Gaylord, Boettiger& Howard, 2011).

With regard to the above-mentioned points, this study aims to investigate the relationship of parenting styles, stress, and type D personality with students' addiction potential and, then, examine the predictive role of these three variables in students' addiction potential.

Method

Population, sample, and sampling method

The population of the study consisted of all Islamic Azad University students who were studying in the academic year 2014-2015. For the sample selection, seven faculties were randomly chosen out of the 11 faculties of the university. In this descriptive-correlational study, 200 students (100 males and 100 females) of Islamic Azad University of Karaj were selected from bachelor and master's programs (176 students in bachelor program and 24 ones in master's program) by convenience sampling method. All the participants in this study were in the 18-to-42-year-old age group with the mean of 23.73 years old and standard deviation of 4.5.

Instrument

- 1- Short perceived parenting styles questionnaire EMBU (Swedish acronym for Egna Minnen Beträffande Uppfostran): This scale was developed by Arrindell, et al. (2005) in 23 items for the replacement of its 81-item counterpart. The current scale contains three subscales of rejection (7 items), emotional support (6 items), and overprotection (10 items) with a 5-point Likert scale (never to always) for scoring. The items are scored from 0 to 4. In the study conducted by the designers of the scale, the reliability of the scale and its subscales was reported to be between .70 and .90. Hassani, Fathi Ashtiani & Rasoolzadeh Tabatabai (2011) obtained the convergent validity of the questionnaire in correlation with parental bonding instrument .77 and .72 for emotional support and overprotection, respectively. Moreover, its divergent validity was also assessed by anxiety questionnaire where the correlation coefficients of emotional support, rejection, and overprotection were obtained equal to -.31, .51, and .45, respectively. Its reliability coefficient for the three subscales of emotional support, rejection and overprotection was respectively obtained as .89, .83, and .93 via test-retest method. In addition, the Cronbach's alpha coefficients for the three subscales were respectively reported to equal .81, .69, and .77. In the present study, the reliability of the three sub-scales of rejection, emotional support, and overprotection was respectively obtained equal to .76, .75, and .75 by means of Cronbach's alpha.
- 2- Perceived Stress Scale: It was designed by Cohen, Kamarck & Mermelstein (1983) in 14 items for the assessment of general perceived stress during the past month. This scale also assesses thoughts and feelings related to stressful events, control and coping, dealing with mental pressure and experienced stress. This scale is scored based on a five-point Likert scale (never to always). Items numbered 4, 5, 6, 7, 9, 10 and 13 are scored in reverse order. In this scale, the minimum and maximum scores of perceived stress are 0 and 56, respectively. Cohen, et al. (1983) calculated the correlation coefficient of this scale with

semiotics and obtained the values ranging from .52 to .76 as the criterion validity of the scale. In the present study, the Cronbach's alpha coefficient of the scale was obtained .78.

- 3- Type D personality scale: This questionnaire was designed by Denollet (1998) to evaluate two general characteristics of negative emotion and inhibition. This questionnaire consists of 14 items, 7 items of which assess negative affect and also 7 items evaluate. Except for items 1 and 3, the whole scale is scored in a 5-point Likert scale (true to false) within the range of 0 to 4. Therefore, each respondent's score in each sub-scale ranges from 0 to 20 while that the score for the total scale ranges from 0 to 56. Zoljanahi & Vafayi (2006) reported the internal consistency of negative affect and social inhibition equal to .77 and .69, respectively. The reliability of the questionnaire in this study was calculated using Cronbach's alpha which equaled .80.
- 4- Addiction potential scale: This questionnaire was constructed by Weed, Butcher, McKenna & Ben-Porath (1992) and contains two factors, namely active readiness (antisocial behaviors, desire to use drugs, positive attitude to drugs, depression, and sensation seeking) and passive readiness (lack of assertiveness and depression). This scale has 36 items in addition to 5 lie detector items (including items numbered 12, 13, 15, 21, and 33). Except for the items numbered 6, 12, 15, and 21; scoring of each item is fulfilled based on a Likert scale from zero (completely disagree) to 3 (strongly agree). Each respondent's score in this questionnaire ranges from 0 to 108. Higher scores indicate a greater potential for addiction. Zargar, Najarian & Na'ami (2008) calculated the reliability of this scale via Cronbach's alpha and reported its coefficient equal to .90. Zeinali, Vahdat & Easavi (2008) obtained the reliability coefficient of this scale equal to .69 and .77 for females and males, respectively. In the current study, the reliability of the questionnaire was obtained equal to .91 using Cronbach's alpha.

Results

The descriptive statistics of the variables of the study are presented in the following table.

Variable	Mean	SD	Min.	Max.			
Stress	28	6.8	2	47			
Type D personality	22.5	8.7	2	46			
Potential for drug use	32	17.7	2	95			
Rejection	11.8	3.7	7	24			
Emotional support	17.7	3.4	8	24			
Overprotection	21.1	4.7	10	33			

Table 1: Descriptive statistics of the variables of the study

Pearson's correlation coefficient was used to examine the relationship of parenting style, stress, and type D personality with potential for drug use and, then, stepwise regression was used to investigate the predictive role of each of these variables in potential for drug use. The correlation matrix of the variables of this study is displayed in the following table.

	Variable	1	2	3	4	5	6
1	Addiction potential	1	-	-	-	-	-
2	Stress	.45**	1	-	-	-	-
3	Type D personality	.44**	.61**	1	-	-	-
4	Rejection	.34**	.20**	.32**	1	-	-
5	Emotional support	40**	28**	25**	42**	1	-
6	Overprotection	.09	.17*	.19**	55**	09	1

^{*}P<.05. **P<.01

The results of stepwise multiple regression on investigating the role of predictive variables in explaining the potential for drug use are presented in the table below.

Table 3: Results of stepwise multiple regression on prediction of potential for drug use

Step	Predictors	R	R^2	В	β	t	Sig.
1	Type D personality	.44	.20	.87	.44	6.96	.001
2	Type D personality	.53	.28	.72	.37	5.86	.001
	Emotional support	.55	.20	-1.49	30	-4.73	.001
3	Type D personality	.55		.48	.24	3.22	.001
	Emotional support		.31	-1.36	27 -4.34	-4.34	.001
	Stress			.54	.21	2.83	.001

As it is observed in the above table, type D personality has entered the equation in the first step and it accounts for 20% of the variance. In the second step, emotional support entered the equation where these two variables together accounted for 28% of the total variance. In the final step, stress entered the equation and constituted 31% of the total variance of potential for addiction along with the other two steps.

Discussion and Conclusion

This study was aimed to examine the relationship of potential for drug abuse with the three variables, namely parenting style, stress, and type D personality. The results showed that rejecting/neglecting parenting style and emotional support were positively and negatively correlated with addiction potential, respectively. Emotional support along with type D personality could predict .28 of the variance of potential for drug use among students. This finding is consistent with those of the studies done by Parker & Benson (2004), Ra'easi, et al. (2008), Farahati (2012), Havasi (2001), and Shokrzadeh (2013). Yousefi

(2007) showed that perception of the family as an authoritarian family predicts antisocial, aggressive, and impulsive behaviors in children. Parents, as the emotional source of children, play a central role in the formation, persistence, and prevention of maladaptive behaviors. Parenting styles play an enormous role in psychological dimensions, including psychological growth, social adjustment, self-esteem, self-confidence, managing emotions, and behaviors. Love and affection along with freedom provide children with a proper space for emotional discharge and an opportunity to learn and gain experience. Parents with cold relations often have depression, anxiety, phobia, and destructive interpersonal relationships with others and, thereby, they behave towards their children in the same way. Thus, cold relationship along with rejection or even insult and violence towards children make them hate their family and lead them to a variety of destructive and maladaptive behaviors.

In addition, the findings suggest the presence of a relationship between type D personality and potential for drug use in a manner that type D personality explained 20 percent of the variance in potential for drug use. This finding is consistent with the results of the studies conducted by (Broek, et al. 2007; Williams, et al., 2008; Whitehead, et al., 2007; Janery & Kan, 2012; Eshratifard, 2012; Ahmadi, et al., 2012; and Aderam, & Nikmanesh, 2011). Some people, due to their certain personality traits, are more susceptible to destructive behaviors are self-harm. These people are indifferent to their physical and mental health; and experience of social negative emotions associated with a reduction of mechanism of social inhibition and weakness in maintaining and reinforcing social and affective support of others will increase their willingness to experience unpleasant and potentially harmful stimuli, including substance abuse. Finally, the probability of addiction raises. Fenichel regards a person's mental structure as an important factor in his/her potential for drug use; and also considers the significant increase in self-esteem and erotic and narcissistic gratification after drug use as the factor effective in drug use persistence. According to Williams, et al. (2008), people with potential for drug use hold negative views about themselves and report more physical symptoms, and are inclined to undesirable stimuli. These individuals encounter difficulty in daily social functions and frequently feel depression, stress, and insecurity when interacting with others. They suffer from maladaptive health behavior such as smoking, lack of exercise and improper diet (Besharat, Darvishi Lord, Zahdmhr & Gholamali Lavassani, 2013).

The results of the current study also suggested the presence of a significant positive relationship between stress and potential for drug use in such a way that stress along with type D personality and emotional support could account for 31 percent of variance in students' potential for addiction. This finding is consistent with the results of the studies done by (Hyman, et al. 2007; McCuller, et al., 2001; Ghasemi et al., 2011; and Pourseyedmoosayi, et al., 2012). When confronted with stressful conditions, people with inappropriate interactions with

parents as well as some traces of personality type D cannot use proper coping methods and are more likely to turn to fleeting and ineffective solutions. Goeders (2004) showed that those exposed to such stimuli as unpleasant marriage, job dissatisfaction or harassment were reported to exude more addictive behaviors. The results of the studies done by Ranjbar Nosheri, Mahmoud Alilou, Omidi Majreh, Ghodrati & Najar Mobaraki (2013) and Rostami, Ahadi & Cheraghali Gol (2013) showed that there was a significant difference between addicts and normal people in the sub-scales of coping strategies for stress, including suppression, self-control, responsibility, and, evasion, avoidance, and problem solving. Pourseyedmoosayi, et al. (2012), Hyman, et al. (2007), McCuller, et al. (2001), and Ghasemi et al., (2011) showed that people who take alcohol and opiates to regulate their mood, increase positive emotional experiences, and reduce negative mood such as depression and anxiety show considerably higher symptoms of alcohol dependence in their lifetime. According to Lazarus & Folkman's transactional model of stress & coping, one can assert that stress depends on two dimensions of individuals' cognitive appraisal and coping strategies in the face of stressful events. People deprived of any transactional model in their previous experiences estimate stressful events too reasonable because of the availability of personality variables underlying inappropriate behaviors. These people are more prone to the development of risk taking behaviors in stressful situations since their behavioral treasury is devoid of the experiences pertaining to the constructive coping methods with those stressful situations. Therefore, turning to addiction is the coping strategy and defense mechanism of the people who have not learned efficient methods of dealing with the problem during the early years of their growth because of lacking a suitable transactional model. They experience pleasure, false confidence, reduced anxiety and stress as a result of initial drug use and consequent achievement of short-term euphoric effects. Then, with the decrease of these effects after drug use, the intense craving for repeated use of drugs is strengthened in such people. Banna, et al. (2010) also showed that stress can considerably increase craving for drug use and relapse in drug among people who are in the process of drug use abstinence.

That the current study was only limited to the students of Azad University of Karaj and was conducted through correlation method stopped the possibility of between-group comparison and limited the generalizability of the results to other populations. Future researchers interested in this research area are recommended to use other groups and mediating and moderator variables in their studies and conduct comparison studies on potential for addiction. Considering the findings of this study, parents' attention to the methods of interaction with children, teaching coping skills and self-control, and methods of dealing with stressful life events can be receive attention in counseling centers.

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