

Self-Esteem and its Relationship to Substance Abuse among a Sample of Addicts

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Abstract

Aim: The objective of this study was to investigate the relationship between self-esteem and substance abuse among a sample of addicts.

Methods: Participants were 101 addicts, aged between 18 and 60 years old. Self-esteem was assessed by using the Rosenberg Self-Esteem Scale "RSE" [1]. Other information regarding motivations for substance abuse obtained thru developed a questionnaire designed for such a purpose. Data were analyzed by using SPSS Version 21.

Results: There was no significant association between self-esteem and the type of substance used and the number of substances used. Moreover, there was not a significant association between self-esteem and educational level.

Conclusion: Results of this study showed that self-esteem might not be an essential psychological mechanism for addiction. However, such results, might have been influenced by the bias in sample selection process because most of the sample were addicted to Cannabis. Moreover, most of the participants have experienced some forms of psychological interventions which may have included psychological ingredients related to self-esteem.

Keywords: *Self-Esteem; Substance Abuse; Addicts*

Abbreviations

IAU: Imam Abdulrahman Bin Faisal University; KFUH: King Fahad University Hospital; RSE: Rosenberg Self-Esteem Scale; SPSS: Statistical Package for Social Sciences

Introduction

Self-esteem indicates an individual's worthiness by understanding oneself and subjective emotional evaluation. The way people view themselves is developed through doing certain actions, thinking about those actions and how people evaluate and perceive those actions. Therefore, self-esteem is moderated by our feelings about ourselves and the value we attach to ourselves [2]. Further, Self-esteem is the way and how individuals judge themselves [3].

The daily experiences shape the thoughts and feelings of people. The results from exams, the way people behave to each other, stress and many other activities done daily in our lives determine the individual vision. High self-esteem can make people having a certain kind of feelings which is specially brought by natural fluctuations. People with low self-esteem get themselves highly influenced by fluctuations and their feelings determined by current actions. To overcome negative feelings and thoughts, individuals go for external positive experiences. Therefore, good feelings in people's life usually have a temporary effect. Self-esteem of a healthy person occurs by identifying themselves appropriately and having the ability to accept themselves during negative and positive moments. At this instance, a person can very well recognize his/her weakness and strengths, and this defines the ego.

A person with high self-esteem, he/she has confidence in all things done or intending to do. Such people view themselves being very special and important to the world. They are very optimistic about the things they do and mostly have solutions of challenging situations. On the hand, low self-esteem has characteristics of humiliation, people don't trust themselves and always be afraid of what they do. This kind of people hate themselves as well and thinks that they are not liked by other people within them. They have a very negative attitude about life. They isolate themselves from other and possess an anti-social character [4].

Self-esteem is considered to be a very important topic which constitutes the most discussed content in psychology. It reinforces most of the psychological concepts like personality, clinical domains, cognitive, and behavioral change [5]. Self-esteem is not supposedly affected by external factors like education, occupation, parents, teachers, and wealth. People view high self-esteem as a weapon in their lives since it helps them to avoid ups and down. They are able to cope with the situation. Some adults play the critical role in building the self-esteem of young people and children. This ensures that as individuals grow, they are not subjected to alcohol and drug abuse despite the peer pressure. Having high self-esteem, one can be productive in most of the activities carried out and relate to others in a friendly manner. To have sustainable self-esteem for even generations to come, the nurturing of positive family relationship is considered as a key. There is a belief that once an individual is nurtured well and gain self-esteem, then this is considered to be beneficial to both that particular person and society [6,7].

Adolescence and adulthood have a period between them called emerging adulthood which is characterized by the development of a well stable identity of being an adult in a natural context that keeping changing [8]. At this time, young people, especially of age 18 - 25, tend to become independent and have their own lives not depending on their guardians like parents and others. They engage in social life where the society ascribes them to perform chores like bearing of children. With their independence, they are still able to continue with their education, look for jobs and carry out activities that sustain their lives. They can make decisions over their lives including even the lifestyle to engage in like having substance use or not. Such choices have impacts and dictate the kind of transition one should have in his/her life [9].

The United States has been experiencing a shift in demographics due to transitions periods between the adolescence and adulthood. In 1950's, the median age was 20 for women and 22 for men in the United States. By 2000, the median age had raised where 25 was for women and 27 for men. In this period of life, many young adults find themselves being unstable and often try to define themselves despite personal changes. This time is also associated with high risky behavior since everyone wants to fulfill the conventional adult roles [10].

The period of emerging adult has new roles and status that the young people tend to be associated with. Leaving the parental home, getting married, full-time employment, financial independence, and completing school are the main transitions that happen in this period [11-15]. This period prepares an individual to be a member of society he/she belongs to [16-19]. Being involved in multiple roles during this transition period enables an individual to have positive functioning about his/her life [20].

The age of 25 is termed to be the experimental time for the drug abuse by most of the people. This is the period when individuals are preparing and taking adult roles [21,22]. Due to the freedom the young people have at this transition time, they get themselves engaged in drug abuse. Parents and other external forces that may monitor the life of youths, no longer do it [23]. The responsibilities like marriage and parenthood inhibit the average people from drinking and usage of substance like Marijuana and cocaine [24]. The emerging adulthood is when young adults start feeding and taking care themselves. At the same time, the period is highly risky since it is also considered as the peak of substance-use disorders [25].

Substance abuse is an international problem which has effects on health, security of nations and wealth. Saudi Arabia population especially the young adult population has been affected by this problem of substance abuse. The substance abuse in Saudi Arabia has been increasing every year. In 1970, the cases were small, and by 2005, the substance abusers had increased by four times [26].

The substances under study in this research include the alcohol and illicit substances such as cocaine and marijuana [27]. Defines substance abuse as "the maladaptive pattern of substance use manifested by recurrent and significant adverse consequences related to the repeated use of substances." The most used substances by the young adults are alcohol than cigarettes and marijuana [28]. Statistics show that 30% - 90% of students use alcohol regularly and 70% use illicit drugs (Chrome, 1997). In 2008, 70% of young adults aged 21 - 25 had used alcohol. This was considered as a higher percentage about other age group. From the same survey, 44% of people aged 21 - 25 were abusing binge [29]. It's true that substance use is prevalent. Therefore, the current research focuses on the relationship between self-esteem and substance use amongst addicts at Al - Amal and Psychiatric Center in Dammam in Saudi Arabia.

Objectives of the Study

1. To review and extend literature about the concept of self-esteem and its association with the substance abuse in addicts.
2. To explore the strength of the relationships of some psychological factors that may lead individuals to substance abuse.

Materials and Methods

Methods

Participants were 101 addicts, aged between 18 and 60 years old. Self-esteem was assessed by using the Rosenberg Self-Esteem Scale "RSE" [30]. Other information regarding motivations for substance abuse obtained thru developed a questionnaire designed for such a purpose. Data were analyzed by using SPSS Version 21.

Study design

This study used a descriptive cross-sectional design. This kind of design is used when the researcher is dealing with a cross-section of a population and not the entire and also is done for a short time. This type of research is very appropriate when studying the relationship between self-esteem and substance abuse. The probability of getting an in-depth data regarding the topic under study is very high [31]. Assert that a good research strategy has a detailed outline and aims at investigating the phenomenon under the study [32] have the opinion that research design consists of a well-formulated plan that guides the research on the way to collect data with the key target samples. This means that the design plays the role of the blueprint which enhances the collection, measurements, and analysis of data. A researcher who uses research design is able to gather, analyze and interpret the meaning of the data collected. Many components of research are brought together using this kind of framework to solve the problem under investigation.

Data collection procedure

The researcher has obtained various approval and permits from the relevant bodies including the departmental and ethical committee of the IAU.

After that, the arrangement with concerned department in Al Amal complex has been held for determining time and place to meet the patients - the place was suitable and quit specially it was in the morning – working forty days to collect the data.

The patients have been handled the research tools and have been told that there is no right or wrong answer, used for scientific research and classified as well.

Data analysis procedure

Descriptive, inferential and narratives were used in the analysis. Descriptive statistics are presented using tables, graphs, frequencies, and charts. Inferential statistics are presented using correlations. Narratives are composed of thematic discussions as per research questions while coinciding the outcome with the discussed literature review. Statistical Package for Social Sciences (SPSS-21) was used in the data analysis. Quantitative data will be analyzed using statistics while qualitative will involves narratives through themes and content analysis.

Results

The study was conducted with 101 participants aged 20 - 60 with addiction. Most of the participants had not gone on to higher education but had received a general education (81%). 20% obtained higher education (See figure 1). They were mostly between the ages of 20 - 40, single, and unemployed (See table 1).

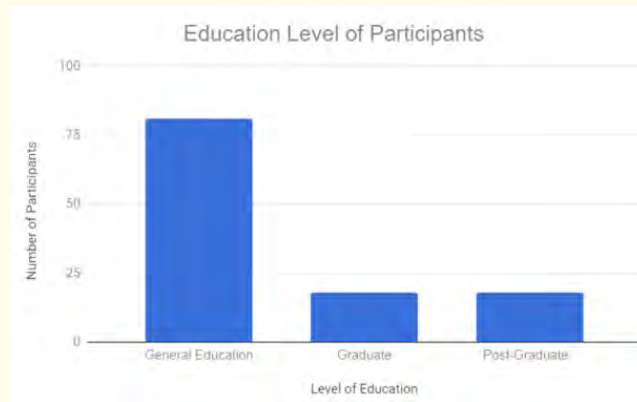


Figure 1: The education level of the research participants. 81 of the participants had received general education, 18 had received a graduate degree, and 2 had received a post-graduate degree.

Valid		Frequency	Percent
Age	From 20 to 30	47	46.5
	From 31 to 40	36	35.6
	From 41 to 50	13	12.9
	From 51 to 60	5	5.0
Marital status	Single	57	56.4
	Married	29	28.7
	Divorce	14	13.9
	Widowed	1	1.0

Occupation	Unemployed	30	29.7
	Student	6	5.9
	Worker	2	2.0
	Employee (Private, government)	17	16.8
	Professional (Doctor, engineer)	2	2.0
	Retired	8	7.9
	Special works	7	6.9
	Soldier	29	28.7
	Total	101	100.0

Table 1: Depicts the demographics of participants (occupation, marital status, and age). Most of the participants were between the ages of 20 - 40, single, and unemployed. A large percentage of the participants were also soldiers (29 participants).

The drug most often abused was Cannabis, with 62 participants saying they abused cannabis (See figure 2). The next most common class of drugs of abuse was amphetamines, with 51 participants self-reporting abuse. Most of the participants were only abusing 1 drug, 21 reported abusing 2 drugs, and 31 reported abusing 3+ drugs (See figure 3).

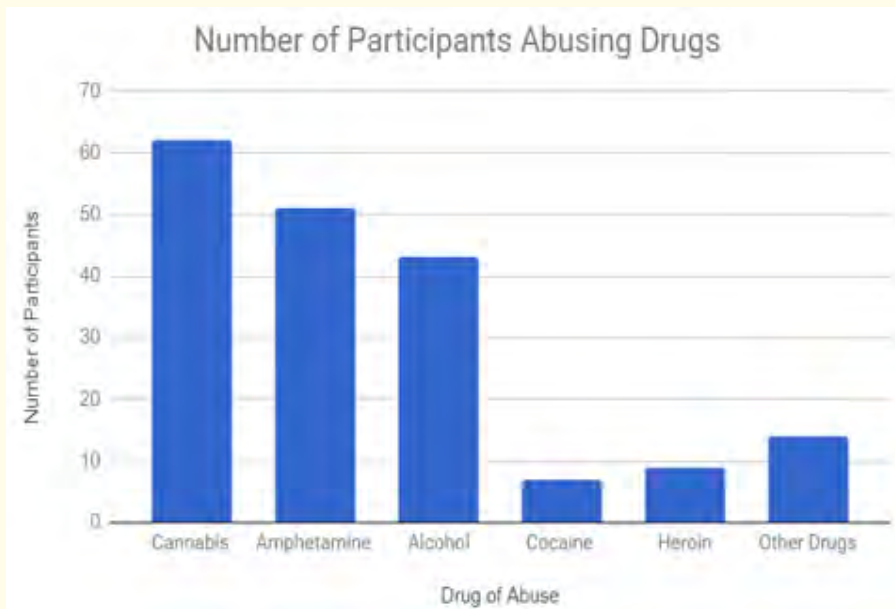


Figure 2: Shows the number of participants abusing each drug. 62 participants were addicted to cannabis, 51 to amphetamine, 43 to alcohol, 7 to cocaine, 9 to heroin, and 14 to other drugs.

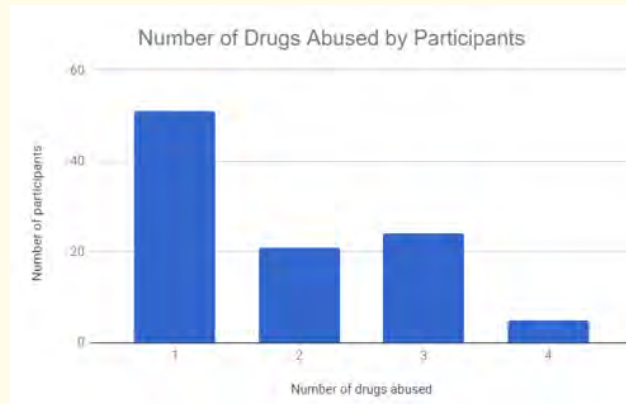


Figure 3: Shows the number of participants that were abusing one, two, three, or four drugs. 51 participants were abusing only one drug, 21 participants were abusing 2 drugs, 24 were abusing 3 drugs, and 5 were abusing 4 drugs total.

The average score on the Rosenberg Self-Esteem scale was within the normal range ($M = 18.91, SD = 4.85$) (See figure 4). Most participants fell within the normal range, with 21 and 6 participants in the low and high self-esteem categories respectively. See table 2 below for the mean scores for each question of the scale.

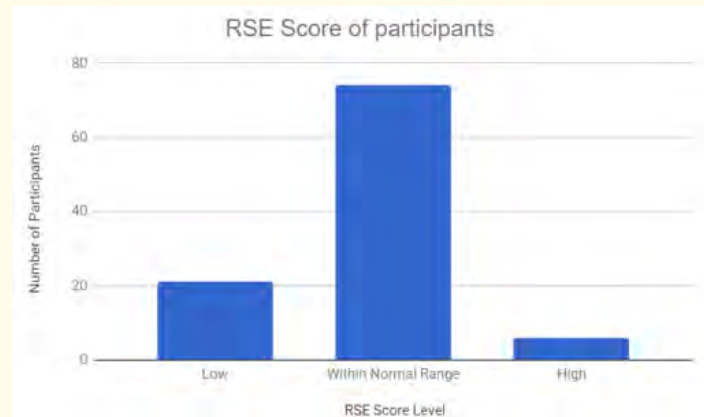


Figure 4: Shows the number of participants with low, normal, and high scores on the Rosenberg self-esteem scale. Low RSE scores indicate lower levels of self-esteem. 21 participants had a lower RSE score, 74 participants had a score within the normal range, and 6 had higher RSE scores.

	N	Mean	Std. Deviation
I feel that I have a number of good qualities.	101	2.2277	.69110
I take a positive attitude toward myself.	101	2.1584	.74475
I am able to do things as well as most other people.	101	2.1584	.79665
All in all, I am inclined to feel that I am a failure. **	101	1.9010	.94345
I feel that I'm a person of worth, at least on an equal plane with others.	101	1.8812	.86356

I certainly feel useless at times. **	101	1.7822	.97575
On the whole, I am satisfied with myself.	101	1.7426	.84443
I feel I do not have much to be proud of. **	101	1.7228	.98101
At times I think I am no good at all. **	101	1.4158	.79079
I wish I could have more respect for myself. **	101	1.1980	.99015
Valid N (Listwise)	101		

Table 2: Shows the questions in the Rosenberg self-esteem scale and the mean score and standard deviation for each question.

Substances abused and RSE score levels

Correlations				
			RSE	Substance abuse
Pearson	RSE	Correlation Coefficient	1	-.079-
		Sig. (2-tailed)	.	.431
		N	101	101
	Substance abuse	Correlation Coefficient	-.079-	1
		Sig. (2-tailed)	.449	.
		N	101	101

Table 3: Shows correlations between self-esteem scale and substances abuse.

Results of the Pearson correlation indicates that there was not a significant relationship between the type and number of substances abused by participants and their raw RSE scores, $r(101) = .159, p > .05$.

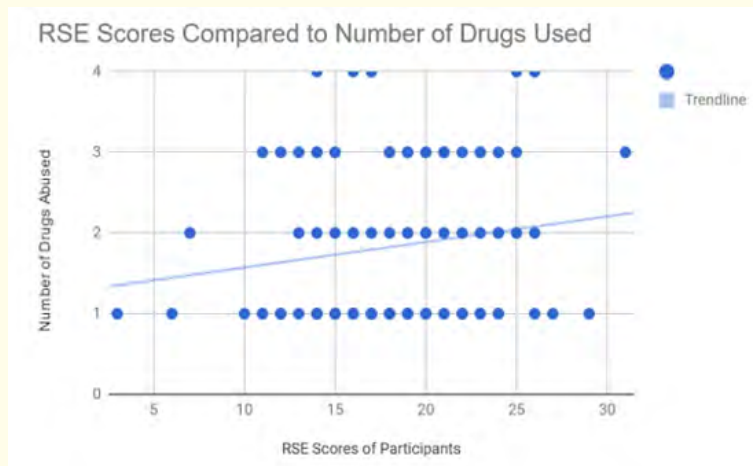


Figure 5: RSE scores compared to number of drugs used. This shows the relationship between the RSE scores (x-axis) of participants and the number of drugs they were abusing (y-axis). There was no significant correlation found between the variables.

Education levels and RSE score levels

Correlations				
			RSE	Education
Pearson	RSE	Correlation Coefficient	1	.012
		Sig. (2-tailed)	.	.908
		N	101	101
	Education	Correlation Coefficient	.012	1
		Sig. (2-tailed)	.908	.
		N	101	101

Table 4: Shows correlations between self-esteem scale and education.

Results of a Pearson correlation analysis shows insignificant correlation between education levels and RSE score levels $r(101) = -.012$, $p > .05$. Likewise, no significant correlation was found between education levels and the number of substances abused $r(101) = .051$, $p > .05$.

Discussion

The purpose of this study is to investigate the relationship between self-esteem as a psychological mechanism for addictive behavior and how it can be influenced positively by educational level that mean those who are highly educated may have high self-esteem as well it was hypothesized that the lower self-esteem individuals had a greater likelihood of being addicts.

From this current study, we were unable to confirm our hypothesis that lower measures of self-esteem would predict higher levels of substance abuse. We were also unable to demonstrate our hypothesis that the more highly educated person is, the less severe their drug abuse will be.

However, results of the current study indicated that self-esteem cannot be correlated to substance abused, samples showed normal self-esteem. Moreover, self-esteem was not sensitive to educational level as well.

Justifications beyond these results are most of the sample were addicts to one type of substances (Cannabis) such results are on the same direction of other studies investigated association between self-esteem and Cannabis [33]. On the other hand studies showed that the most factor associated with low self-esteem when addicted to alcohol abuse which usually comorbid with depression [34,35].

Moreover, part from the management program of AL Amal Complex, individual of the sample was setting for psychological therapies which may have included components targeting their self-esteem therapeutically.

Limitations of the Study

This study consisted of males, so it is a possibility that the correlations could be weaker or stronger in populations of women. Our sample of people was very diverse in terms of age, occupation, and marital status. The participants were also undergoing treatment for addiction, which may have increased their self-esteem. The available few participants were not addicted to all types of drugs, but were mostly addicted to cannabis.

The respondents were also prejudiced in the manner they answered the questions and this is the reason as to why there is no correlation between the hypothesis and results given. The manner in which they gave their opinion was just but without following procedure and guideline. I tend to think it's because of their status and addiction to substance abuse. Lack of confidence despite the research giving an informed consent was also an issue to the respondents since they were not ready to be interviewed and this could also have been the cause of insignificance. Their attitude towards the interview was negative as they thought that the kind of information, they gave might be used to affect their lives.

The researcher made efforts to manage the effect of any of the limitations.

Conclusion

The purpose of this study was to examine the relationship between measures of self-esteem and substance abuse and to study the relationship between education level and self-esteem. It was hypothesized that the lower self-esteem individuals had a greater likelihood of having problems with substance abuse. From this experimental data, the researcher was unable to confirm our hypothesis that lower measures of self-esteem would predict higher levels of substance abuse, we were also unable to demonstrate our hypothesis that the more highly educated a person is, the less severe their drug abuse will be.

Our results showed no significant relationship between any of the variables measured and does not support existing research. This study contradicts previous research that found correlations between low self-esteem and drug use [36]. Our study did fall in line with previous research in that we found that most of the patients were between the ages of 20 - 30 [37]. Around 25 is the age when adults have more freedom to begin to experiment with drugs.

Therefore, this result gives an indication that is not suitable to judge or to assume concerning self-esteem and substance abuse. Even people with high self-esteem abuse drugs and they are actually linked to expensive and illegal drugs. The association between low self-esteem individuals is the sense that they see themselves weak hence should take abuse substances of lower class which are deemed more dangerous in terms of health. The acceptance of null hypothesis means that the researcher's objectives do not correlate with the predicted guess which came from respondents.

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Conflict of Interest

The authors declare that they have no competing interests.

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