Prediction of drug tendency use on the basis of religious orientation and thrill-seeking of students

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Suggested Citation:

Received from August 20, 2018; revised from November 06, 2018; accepted from February 12, 2019.
Selection and peer review under responsibility of Prof. Dr. Tulay Bozkurt, Istanbul Kultur University, Turkey. ©2019. All rights reserved.

Abstract

The aim of this study is to predict the trends in drug use and sensation seeking on the basis of religious orientation in students of Islamic Azad University Branch of Roodehen in the first semester of the school year 92–93. For this purpose, 120 male and female students who have been selected for a random sample of correlation between the two variables is an indicator variable and, religious orientation Alport, Zuckerman Sensation Seeking and attitude to drug use that all tests have been completed standardisation Iranian issue. As a result of this study, among variables, it can be stated that sensation seeking, experience seeking, adventure and boredom are significant predictors for basic variable (towards drug abuse), whereas diversity, avoid forbidding, internal and external religious orientation are not significant predictors for basic variable (towards drug abuse).

Keywords: Attitude to drug use, religious orientation, thrill-seeking.
1. Introduction

Religion constructs have been found as the predictors of happiness. For instance, some researchers have demonstrated that individuals differ in their religious orientation and that these differences are related to variations in personality, happiness, religious experience and religious and nonreligious attitudes (Allport & Ross, 1967; Altemeyer & Hunsberger, 1992; Maltby, 1999). Allport and Ross (1967) have proposed two main religious orientations: intrinsic and extrinsic. Individuals with an intrinsic orientation towards religion were described as wholly committed towards their religious beliefs and that religiosity was evident in every aspects of their life. On the other hand, those with an extrinsic orientation used religion as a means to provide participation in a powerful in-group protection, consolation and social status (Allport & Ross, 1967). This difference between religious orientations is said to be related to personality traits, and these differences have an effect on happiness. For example, Saroglou (2002) in a meta-analysis study, using the five factors model of personality as a framework, found that general religiosity was related to extroversion, agreeableness and conscientiousness. He found that intrinsic religious was related to low agreeableness, low neuroticism and low openness, while extrinsic religion was related to neuroticism (Moltafet et al., 2010).

Religion has often been a variable of interest to researchers who wish to describe and understand the experience of college students. In the past, most such studies have focused on religious beliefs and practices or have attempted to describe changes in such beliefs and practices over the course of the college experience. Recent research that looks specifically at the religious life of college students has been limited; however, religious researchers seem to have heeded the advice of Dittes (1969) and turned their attention to the homogeneous populations of specific religious traditions, e.g., Catholics, Protestants Baptists and others. Such studies attempted to define and measure religious variables using subjects—who were expected to be ‘religious’ to discover what it was ‘religious’ to them. Although the results of such studies were limited in their generalisability, they have provided rich data about the religious: orientation, beliefs, practices and attitudes of persons identified with institutional religion and have suggested the ways of understanding the religious aspects of personality that exist apart from institutional involvement. The person with orientation may be defined as the one who ‘subordinates and tailors religious practices and beliefs to the satisfaction of personal motives’, and the person with an intrinsic religious orientation as the one who ‘subordinates and tailors personal motives and practices to the precepts of religion’. As a personality variable defined in this way, religious orientation should be a useful way to understand the religious attitudes of the heterogeneous western population regardless of religious tradition or affiliation (William, 2010).

L.B. Brown’s model of religious faith posits two bipolar religious orientations (intrinsic–extrinsic and autonomy-observance) that represent a two-dimensional space in which a religious believer can be located. This paper proposes a developmental sequence within Brown’s model. The psychometric tradition of religious orientations is combined with a developmental tradition. The developmental process is consistent with models by A. Maslow, L. Kohlberg, J. Fowler and J. Loevinger. Religious faith typically springs from extrinsic motivations. Most religious adherents achieve the next level, ‘observance’, or identification with a religious community and its creeds. Some progress to intrinsic religiousness and a few attain religious autonomy (Richard & Mary, 1981).

Humans—species of illness—relive pains and reduce psychological suffering using drugs for thousands of years. But today, substance abuse is a common phenomenon, referred as addiction, and brings a lot of personal social problems. Substance orientation has a direct relation with private areas of attitude such as understanding drugs legality and social acceptance and losses from drug abuse or pleasant moods and the consequence of consumed substance. In this study, religious orientation and excitation were used for the study of substance orientation. Dorais’s study (2007) showed that religious is a relation between religious faith with hope and identity. Espilk and Etal (according to reshad of 2008) showed that religious in the process of dealing with incident and problems has three main roles:
1. Provide meaning to life.
2. Help people to have a sense of control, when faced with different situations.
3. Create a sense of confidence to the people.

On the other hand, in response to emotional experience, thrill is a complex situation. Sensation is one of different levels of it. Some seek adventure and some small and some are it between two groups (Momtaz, 2003). Emotional people to obtain optimal arousal level to engage in different ways socialise with different friends for stimulation, not because they affect others. Zuckerman found that 74% of students who had high emotions consumed one or more than a type of drug. According to Bakhshipour and Mahmood Aliilo (2008), this level in less emotional students was 32%. Drug addiction is one of the fundamental problems in the society, which destroys millions of lives and national resources for fighting, treatment and harms incurred by addiction (Khosroshah & Khanjani, 2013). Drug addiction imposes biological, psychological and social problems and incurs profound harms to the health of the society (Hajiyan, Khirkhah & Falatoni, 2013). The global problem of addiction and drug abuse causes 5 million deaths and about 42 million new cases of AIDS each year. Iran suffers from pervasive drug use for certain reasons. According to the Deputy for Prevention of the Welfare Organisation, drug addiction grows at a rate of 8% per year in Iran, while population growth is 2.6% (Soltani, Asgari & Toghi, 2015). Iran has about 1,200,000 addicted people and 800,000 recreational drug users. Drug abuse is followed by loss of life and property, social consequences such as economic costs, death, suicide, heavy offenses, unsuccessful marriages and the risk of sexually transmitted diseases such as AIDS and hepatitis. As the findings of extensive population-based studies on drug users show, the relatively high prevalence of drug use and changes in the trend of drug use (using impure drugs) increase the drug-induced mortality (Parhami, Davitan, Coillard, Lopez & Fong, 2015).

Today, addiction treatment centre use conventional techniques of brief interventions such as training programmes of anger management, increasing incentive to reduce drug use, reduced drug dependence and cognitive behaviour therapy and prevention of lapse. Studies show that a variety of factors affect drug use including social factors, such as the influence of friends, acquaintances or family members, influence of media and advertisement for drug and cigarette use, and lack of resistance to peer pressure, and interpersonal factors, such as low self-esteem, excessive anxiety, frustration, low self-control and sensation-seeking. Social and cultural factors of tendency for drugs include cultural–social domain, including the availability of drugs and non-scientific advertisement of beauty products and athletic supplements; family domain, the presence of a drug addict in the family, parent-adolescent relations and parental control variables; peers and friends domain; adolescent’s personality domain; emotional functioning and social attachment. In a study on addicted people, the most common causes of tendency for drug use were factors such as addicted friends, unemployment, lack of attention to religious tendencies, economic problems, marital discord, lack of recreational facilities, availability of drugs and failure to say no to others’ demands (Amiri, Taheri, Hosseini, Mohsenpour & Davidson, 2016; Mardani, Sheykhe Fini & Kavousiyan, 2011).

Addiction is defined by tolerance, withdrawal and craving. We recognise addiction by a person’s heightened and habituated need for a substance, by the intense of suffering that results from discontinuation of its use and by the person’s willingness to sacrifice all (to the point of self-destructiveness) for drug taking. Addiction, at its extreme, is an overwhelming pathological involvement: the object of addiction is the addicted person’s experience of the combined physical, emotional and environmental elements that make up the involvement for that person. Addiction is often characterised by a traumatic withdrawal reaction to the deprivation of this state or experience. Tolerance or the increasingly high level of need for the experience otherwise called craving is measured by how willing the person is to sacrifice other rewards or sources of well-being in life to the pursuit of the involvement. The key to addiction, seen in this light, is its persistence in the face of harmful consequences for the individual. There are numerous determining factors for how long drug toxins stay in a person’s body, which vary from person to person, such as the analytical method used, health, body weight, metabolism, fluid intake, type of toxin and the degree of exposure to the toxin.
Most researchers believe that addictions are centred around the effect that addictive drugs have on dopamine levels in the brain. Addictive drugs, which generally have numerous other dangerous side-effects, also elevate the levels of dopamine in our brain. Our body then continues to crave these feelings and this may account for the repetition inherent in addictive behaviour. The more drugs such as alcohol, nicotine, marijuana, cocaine and amphetamines are used to enhance mood; the more they are used, the more the craving of their use for continued mood enhancement until they become an addiction. In addition, people do the things a lot they tend to develop an enjoyment for. This includes addictions or obsessions to potentially negative behaviours, such as sex, pain, criminal activity, etc. that produce increased levels of dopamine for ‘feel good’ rushes. Researchers believe that heredity may be increase the susceptibility to addiction. Research has found that children of alcoholics or a family history of alcoholism are 400 times more likely to use drugs and have a drug addiction. The results of previous research studies support the conceptual model of research.

Aim of Gili, Zanganeh Motlagh and Taghvayi (2017) study was to predict the drug use tendency based on psychological loneliness and cognitive emotion regulation in patients recovering from drug addiction. The current study is a descriptive correlational research. The sample size contained 120 addicts under recovery from drug addiction who were selected as the sample units via convenience sampling method. Farjad drugs use tendency questionnaire (2006), Russell, Peplau & Cutrona’s UCLA Loneliness Scale (1980) and Garnefski’s Cognitive Emotion Regulation Questionnaire (2001) were used to measure the variables. The results showed that psychological loneliness and obsessive thinking (rumination) have a significant positive relationship with drug use tendency. However, cognitive emotion regulation was revealed to hold a significant negative relationship with drug use tendency while there was no relationship between self-blame and drug use tendency. Psychological loneliness was revealed to be the strongest predictor of drug use tendency. These findings have important implications in the pathology of drug abuse. Thus, clinical technicians can stop the incidence of psychological loneliness by providing appropriate advice and consultation and can embark on the treatment of drug abuse by teaching cognitive regulation strategies.

Aim of Bayrami, Goradel, Hashemi and Mahmood-Allilu (2012) was to predict the tendency for drug use from child and adult symptoms in adults among male students from Tabriz University, Iran. For this purpose, 361 students were selected via a stratified random sampling from different faculties of Tabriz University. The students completed the Conners Adult ADHD Rating Scale self-report form and subscale questionnaire, Addiction Acknowledgment Scale (AAS) and MacAndrew Alcoholism Revised-Scale (MAC-R). To analyse the data, Pearson correlation and multiple regressions (step by step) were used. Results indicated that there is a significant relationship between scores on the AAS and MAC-R via child and adult ADHD symptoms ($p = 0.01$). Moreover, we found that those with the highest addiction acknowledgment (13%) exhibited adult ADHD (total) and child ADHD. Alcohol potential (15%) was related to the scores of child ADHD and impulsivity. According to this result, behavioural disorders, especially ADHD, have an effect on the tendency to use drugs; therefore, the primary treatment of behavioural disorders should prevent future drug abuse. Resilience refers to abilities to cope adaptively with adversity or trauma. A common psychological sequella of childhood abuse or other traumatic experiences is substance use problems. There are, however, very limited data on relationships among resilience traits, childhood abuse, and alcohol or drug use problems. Aim of Wingo, Ressler and Bradley (2014) study was to examine associations between resilience characteristics and lifetime alcohol and illicit drug use in 2024 inner-city adults with high rates of childhood abuse and other trauma exposure. In this cross-sectional study, resilience was assessed with the Connor–Davidson Resilience Scale, childhood abuse with the Childhood Trauma Questionnaire, lifetime alcohol and illicit drug use with the Alcohol Use Disorder Identification Test and Drug Abuse Screening Test. Associations between resilience and substance use were examined with linear regression models, adjusting for trauma load, age and sex. We found that resilience characteristics mitigated tendency for lifetime alcohol use problems both as a main effect and an interaction with severity of childhood abuse after trauma severity, age and sex were controlled for. Similarly, resilience reduced lifetime illicit drug use both as a main effect and as an interaction with
severity of childhood abuse after trauma load, age and sex were adjusted for. Our findings add to a nascent body of literature suggesting that resilience characteristics mitigate risks not only for PTSD, major depression and suicidality, but also for substance use problems in adults exposed to childhood abuse or other traumatic experiences.

Aim of Massash et al (2017) study was to investigate the relationship between perceived social support and family functioning in the students’ tendency towards illicit drug use. The study had a cross-sectional design. A total of 156 students of Allameh Tabatabaei University were selected in the 2013–2014 academic year in Tehran, Iran, and the required information was obtained from them by three questionnaires: perceived social support, family functioning and students’ tendency towards illicit drug use. There was a significant relationship ($p < 0.005$) between perceived social support and students’ tendency towards illicit drug use. The family functioning also had a significant correlation with the tendency of students towards drug misuse. Based on multiple regression coefficients, perceived social support and its components and family function were strong variables to predict illicit drug use potential. Improving social support as well as constructive and positive functioning of the family can reduce students’ tendency towards illicit drug use. On the contrary, weak social networks and lack of constructive communication between the individuals and society, as well as stressful family environment are among factors of students’ and young people’ tendency towards drug misuse. Addiction, theft and prostitution are among the most important problems of contemporary society. On the other hand, self-esteem is one of the most important variables and concepts that might have a meaningful influence on these problems. Aim of Alavi (2011) study was to investigate the role of self-esteem in the individuals’ tendency to addiction, theft and prostitution in Kerman city, Iran. The statistical population of this study is those individuals who had a record of addiction, theft and prostitution in Kerman prison, and the ordinary individuals. The research sample consisted of 300 individuals; 200 of them were with the record of addiction, theft and prostitution in the central prison of Kerman city, and 100 of them were ordinary people. Because some of the research questionnaires were not returned, only 283 questionnaires were analysed. The instrument for determining the respondents’ self-esteem was Eysenck Self-esteem Inventory. Self-esteem had a meaningful role in the individual’s tendency to addiction, theft and prostitution. On the basis of the research results, it can be concluded that those who are involved in addiction, theft and prostitution have a lower self-esteem compared with the ordinary person. Thus, it is necessary to increase an individual’s self-esteem in order to decrease their tendency to addiction, theft and prostitution. Thus, this study wants to answer this question that ‘Is it predicting the tendency towards drug in student based on religious orientation and thrill-seeking?’

2. Research method

The studies’ objective is functional. For this purpose, a correlation with an indicator variable and two predictor variables is used. The population includes all day and night turn students studying in Islamic university in Tehran, Roodehen unit at least one year of study passes at the university. In this study, 120 questionnaires from each scale a total of 360 questionnaires from all three measures among the random samples of associate, bachelor, master students, male and female were distributed at least two months during the morning and evening universities and responses have been collected.

20 questionnaires were incomplete in every scale. Hence, in total, 60 questionnaires in every 3 evaluation scale have been removed and finally, in the remained 300 questionnaires, Pearson correlation and multiple regression were used to analyse the data.

Scale tool:

A) Zuckerman sensation seeking test.
B) Allport religious attitude questionnaires: this scale contains 20 questions in which 11 options are related to external religion orientation and nine options refer to external religious orientation. The
reliability of this scale was evaluated by John Bozorgi (2008) in a sample including 235 individuals of university students in Tehran province. The Cronbach alpha was estimated as 0.738. C) APA test (scale of addiction potential of university of medical Bagieatallah).

3. Findings

<table>
<thead>
<tr>
<th>Variables</th>
<th>Mean</th>
<th>Middle</th>
<th>Index</th>
<th>Standard deviation</th>
<th>Minimum</th>
<th>Maximum</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thrill-seeking</td>
<td>94/11</td>
<td>12</td>
<td>12</td>
<td>8</td>
<td>1</td>
<td>23</td>
<td>22</td>
</tr>
<tr>
<td>Their experience</td>
<td>18/5</td>
<td>5</td>
<td>5</td>
<td>5/2</td>
<td>0</td>
<td>16</td>
<td>16</td>
</tr>
<tr>
<td>Adventure</td>
<td>92/2</td>
<td>3</td>
<td>2</td>
<td>3/1</td>
<td>0</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Weariness of</td>
<td>19/3</td>
<td>3</td>
<td>3</td>
<td>26/1</td>
<td>0</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Variety</td>
<td>09/2</td>
<td>2</td>
<td>2</td>
<td>06/1</td>
<td>0</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Avoid pregnancy</td>
<td>27/1</td>
<td>1</td>
<td>1</td>
<td>70/0</td>
<td>0</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>External religious orientation</td>
<td>52/33</td>
<td>34</td>
<td>34</td>
<td>35/7</td>
<td>16</td>
<td>51</td>
<td>35</td>
</tr>
<tr>
<td>Internal religious orientation</td>
<td>02/30</td>
<td>30</td>
<td>30</td>
<td>37/6</td>
<td>14</td>
<td>45</td>
<td>31</td>
</tr>
<tr>
<td>Tendency to Substance Abuse</td>
<td>07/82</td>
<td>74</td>
<td>74</td>
<td>31/45</td>
<td>10</td>
<td>204</td>
<td>194</td>
</tr>
</tbody>
</table>

The findings show the amount of central tendency and dispersion such as standard deviation, minimum and maximum range. On the other hand, the central index is approximately equal in all the variables, which could also be indicative of normal distribution of data.

<table>
<thead>
<tr>
<th>Model</th>
<th>Sum of squares</th>
<th>Degree of freedom</th>
<th>Mean square</th>
<th>F</th>
<th>.Sig</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regression</td>
<td>75,656/9</td>
<td>8</td>
<td>9457/11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Remaining</td>
<td>127,643/6</td>
<td>91</td>
<td>1,402/67</td>
<td>74</td>
<td>0.000</td>
</tr>
<tr>
<td>Total</td>
<td>203,300/5</td>
<td>99</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Results of Table 2 show that according to value, this regression is significant, so be the default implementation analysis there.

<table>
<thead>
<tr>
<th>Model</th>
<th>Non-standard factor</th>
<th>Standard factor</th>
<th>t</th>
<th>Significant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Constant</td>
<td>151/51</td>
<td>30/39</td>
<td>4/98</td>
<td>0/01</td>
</tr>
<tr>
<td>Thrill-seeking</td>
<td>2/98</td>
<td>1/27</td>
<td>0/303</td>
<td>2/3</td>
</tr>
<tr>
<td>Their experience</td>
<td>5/3</td>
<td>2/27</td>
<td>0/24</td>
<td>2/3</td>
</tr>
<tr>
<td>Adventure</td>
<td>-12/16</td>
<td>3/7</td>
<td>-0/33</td>
<td>-3/9</td>
</tr>
<tr>
<td>Weariness of</td>
<td>-13/6</td>
<td>3/4</td>
<td>-0/38</td>
<td>-3/9</td>
</tr>
<tr>
<td>Variety</td>
<td>0/029</td>
<td>4/25</td>
<td>0/001</td>
<td>0/007</td>
</tr>
<tr>
<td>Avoid pregnancy</td>
<td>-2/5</td>
<td>5/7</td>
<td>-0/039</td>
<td>-0/44</td>
</tr>
<tr>
<td>.External religious orientation</td>
<td>-0/67</td>
<td>0/53</td>
<td>-0/109</td>
<td>-1/27</td>
</tr>
<tr>
<td>Internal l religious orientation</td>
<td>0/86</td>
<td>0/65</td>
<td>-0/12</td>
<td>-1/3</td>
</tr>
</tbody>
</table>

Results of Table 3 show that among the variables, thrill-seeking and loving experience directly, and adventure and boredom of reverse are the most significant predictor variables for the criterion variable (towards during abuse).
4. Results and discussion

Results show the relation between the tendency of drugs use for thrill-seeking with intrinsic and extrinsic religious orientation.

This finding is consistent with the result of Martins, Storr, Alexandre and Chilcoat (2008) and Rostami (2004). This result indicates that the degree of sensation in people is associated with the risk of substance abuse and, in other words, the higher the degree of sensation in people, the more the risk by drug use. In recent years, use of drug led to spread of diseases such as AIDS and Hepatitis; the epidemic of these diseases endangered human lives more than substance. Thus, this connection can be used to identify the people at the risk of substance abuse and has recommended that strong support of policy markers is required in harm reduction programmes.

As a result, it can be stated that thrill-seeking, experience seeking, adventure and boredom are significant predictors for basic variable (toward drug abuse).

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