

## SOME CHARACTERISTICS OF A GROUP OF HEROIN ADDICTS

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### **Summary:**

*The research was conducted on a group of 50 heroin addicts, 47 males and 3 females, between 17 and 30 years of age, whose addiction to heroin was ranging from 2 to 10 years. In addition to an interview of the type "curriculum vitae", which was held with each of the examinees, the Cornell Index and Rosenberg's Self-Respect Scale were also applied individually. The results can be summarized in a following way: Three of the 50 examinees are illegitimate children; four of them have been faced with parents' divorce in their childhood; 20 of the examinees are first-born children, four of which are single children. Their success in school was much better in elementary school than in high school. Only one of the examinees has not completed elementary school. Cornell Index and Rosenberg's Self-Respect Scale were applied to 37 examinees. Results in the Cornell Index indicate that 20 examinees have manifested above-average asthenic syndrom, 9 examinees have manifested above-average conversive syndrom and 10 examinees have manifested all three factors in an above-average measure. The average result on Rosenberg's Self-Respect Scale is 23.6. On 4 of 10 scales the great homogeneity of answers was observed, while the other scales show pronounced heterogeneity. The size of the sample does not allow generalizations, but regardless of this limitation, the obtained results have still provided some useful information.*

**Key words:** addicts, heroin, characteristics

### **SAMPLE AND METHODOLOGY**

The group of examinees participating in this research was composed of 50 heroin addicts, 47 males and 3 females. Their age range was 17 to 30, while their heroin addiction ranged from 2 to 10 years.

An interview of a "curriculum vitae" type was conducted with each of the examinees in order to collect some general information about the family and education, while the evaluation methods used in this research were Cornell Index and Rosenberg's Self-Respect Scale.

Cornell Index enables the researcher to establish 12 primary and 3 secondary factors of neurotic reactions. The secondary factor marked as F1 and called asthenic is determined by following primary factors: anxiousness, phobic fears, hypersensitivity, depression and obsessive-compulsive tendency.

The secondary factor F2 or conversive factor is determined by cardiovascular, gastrointestinal and inhibitory conversion and hypochondriacal tendencies. The third secondary factor, F3, includes impulsiveness, aggressiveness and paranoid tendencies. Secondary factor F3 is defined as the sthenic factor.

Cornell Index consists of 110 statements and the examinee is asked to mark under each statement whether that what is stated in it he judges as correct or incorrect in relation to himself. The result of this questionnaire is presented as the sum of affirmative answers - each reply "correct" brings 1 point.

Apart from the above mentioned factors Cornell Index contains also the F and L Scale. The F-Scale is not measuring any particular psychic characteristic, it represents an indicator of "reactional mechanisms at the moment of testing" (Momi-

rović, Kovačević, 1970). The L-Scale measures the dissimulation tendency.

The Self-Respect Scale measures the general feeling of self-respect in an individual, that is, the feeling of one's own worth. Self-respect is the value determining and emotional component of self-perception. Rosenberg's Scale consists of 10 statements and the examinees are asked to express the degree of agreement or disagreement with each of the statements. The degrees of agreement have the following numerical equivalents: 0 = total disagreement; 1 = partial disagreement; 2 = neither agreement, nor disagreement; 3 = partial agreement; 4 = full agreement. The sum of these numerical equivalents represents the result on this scale.

"Curriculum vitae" is the interview in which the examinee is telling the interviewer his life story. The interviewer intervenes only when it comes to a significant straying away from the basic story or if the examinee is avoiding to mention certain periods or certain persons in his life, for instance, one of his parents.

In this group of 50 examinees, 19 of them were drug addicts "from the streets"; 10 of them were at the time of the research in the hospital, where they have been treated for hepatitis resulting from the use of dirty needles; 17 have asked for medical help (psychiatry or Heptanon medication), so that the interviews with them were conducted within the frame of that treatment; 4 of them were working with a clergyman or a nun, in an attempt to prepare for joining of some commune, and the interviews with them were conducted as a part of these preparations. The interviews were conducted by two researchers.

The results of Cornell Index and Rosenberg's Self-Respect Scale were obtained from 37 examinees, while the rest of them were not ready to fill out the questionnaires or have filled them out only partially, so that they could not have been used for analysis.

The sample studied in this research can be termed as incidental, that is, it included only those drug addicts with whom it was possible to get into contact and who were willing to talk with the researchers.

## RESULTS AND DISCUSSION

Familial circumstances of the 50 heroin addicts who have participated in this research are as follows: three of them are illegitimate children and from the day of their birth have lived only with their mothers; another four have also lived alone with their mothers because their parents have been divorced since their early childhood; four of the examinees have lost their father, who died in their early adolescence, and the parents of another three examinees have been divorced during the same pe-

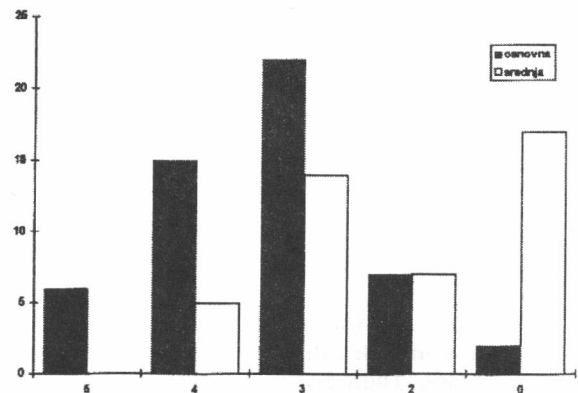
riod in their lives. Undisputably, a formally complete family does not necessarily mean an appropriate surrounding for child's development, just as an incomplete family does not necessarily represent the risk factor in a sense that children from such families will be more likely to reach for the drugs. Still, the information that 14 of the examinees have been growing up without a father, already from the time of their early childhood or early adolescence, or that, in some cases, they maintained only a very infrequent and superficial contact with an absent father, cannot be ignored.

Twenty examinees are firstborn children (not counting the single children), which does not differ from the number of firstborn children among those who were not in contact with drugs.

According to their statements, it was possible to establish that only three of the examinees has had religious upbringing and later continued to practice their religion. One third of the examinees had no religious upbringing.

About one third of the examinees started with consummation of alcohol before the age of 13.

The information about the examinees' education and success in school, both elementary and high school, was collected from the interviews. The results are presented in the Picture 1. Category "0" refers to the drop-outs, i.e. those who have stopped attending regular school.



Picture 1 - *legenda*: - elementary school;  
- high school

As it is apparent from this picture, the collected data show significantly higher success in elementary school. However, in the 7th and 8th grade of elementary school the examinees have often started to show significantly less interest in school and have often stated that the school has become "endlessly" boring. Still, in most cases, they have finished the elementary school in regular time, although with lower notes. Only one of the examinees did not complete the elementary school.

In high school, their success was significantly lower, they were much more often skipping classes and their interest in learning and attending classes has drastically dropped. It is sometimes hard to determine whether these school related behavioral changes have preceded their experimenting with drugs or followed later. It seems, however, that in most cases first came the feeling of boredom and the lack of interest in school, what can be partly attributed to the peers influence.

Using the life stories of the examinees as the sources of information, the researchers have tried to find out more about the motives that have induced them first to try drugs, then to continue to consume them and finally, to become addicts. In their attempt to establish such motives the researchers encountered two difficulties: first, in what measure are the addicts able and willing to remember those motives (and are they able to recognize them?) - in cases when they are mentioning them of their own accord; and second, how accurate are the interviewer's evaluations of those motives when the examinee is not mentioning them directly, so that they can only be deduced from indirect indications in the examinee's story. Taking into account these two difficulties, it was possible to conclude that the most frequent motives were: curiosity (17 examinees); influence of their friends or "gang" (26); desire to escape problems (20); and some sort of rebellion (10). Most frequently there were several motives present either at the same time or following closely one after another in a short period of time. Curiosity was often combined with other motives, as also the need for social prestige (as mentioned by Bergen), that is, the inclusion into a certain group or "gang".

Cornell Index and Rosenberg's Self-Respect Scale were used to establish some of the personality traits of the heroin addicts. The results presented refer to 37 examinees. The arithmetic means and standard deviations were computed for both scales. For Cornell Index, apart from statistic parameters for the entire questionnaire, additional parameters were calculated for the three factors which are included in the total result. The results are presented in the following Table and the symbols used represent the following terms:

F1 = Asthenic Factor

F2 = Conversive Factor

F3 = Sthenic Factor

T = Total Result in Cornell Index

S = Self-Respect Scale

M = Arithmetic Mean

s = Standard Deviation

	F <sub>1</sub>	F <sub>2</sub>	F <sub>3</sub>	Uk	S
1.	11	6	7	24	22
2.	5	0	2	7	34
3.	13	15	5	33	20
4.	28	21	15	64	10
5.	14	12	4	30	18
6.	4	3	3	10	30
7.	7	0	1	8	34
8.	29	17	15	61	19
9.	15	6	9	30	22
10.	16	6	9	31	28
11.	12	17	8	37	28
12.	23	32	13	68	17
13.	16	26	12	54	17
14.	5	9	9	23	20
15.	13	7	8	28	26
16.	20	4	5	29	22
17.	18	5	11	34	19
18.	1	1	2	4	32
19.	8	0	7	15	26
20.	5	1	2	8	38
21.	4	10	7	21	24
22.	20	3	7	30	28
23.	1	3	2	6	38
24.	4	5	4	13	30
25.	22	3	10	35	19
26.	21	13	10	44	17
27.	1	1	2	4	34
28.	21	7	14	47	22
29.	9	3	10	22	26
30.	21	17	10	48	10
31.	21	19	15	55	17
32.	2	2	1	5	28
33.	28	25	13	66	10
34.	13	14	8	35	24
35.	11	6	8	25	20
36.	26	26	10	62	22
37.	17	21	8	46	21
<b>M</b>	<b>13.94</b>	<b>10.08</b>	<b>7.90</b>	<b>31.40</b>	<b>23.57</b>
<b>s</b>	<b>8.51</b>	<b>8.63</b>	<b>4.29</b>	<b>18.79</b>	<b>7.21</b>

From the results shown in this Table it is evident that the mean values of this group of examinees do not diverge from the mean values established on the so called normal sample (M F1 = 13.03; M F2 = 9.03; M F3 = 7.38; Momirović, 1970).

If we review these results in relation to the rough division into categories of normal (0-19 points), average (20-38 points) and distinctive neuroticism (39-100 points) with regard to the total result in the Questionnaire, it can be concluded that 10 examinees are manifesting normal, 16 exami-

nees average and 11 examinees distinctive neuroticism, which is not in agreement with the often emphasized distinctive neuroticism of narcotic addicts. As the result on L-Scale is within allowable limits ( $M = 0.83$ ), the results can be considered as reliable.

Depressiveness is most frequently mentioned as determiner of neuroticism characteristic for narcotic addicts. The analysis of the results of the examinees shows that the mean value of their results for depressiveness does not exceed the limits of the standard for so called normal population. The analysis of individual results indicates that 12 examinees are showing the symptoms of an above-average depressiveness based on the results in Cornell Index.

The results in Cornell Index, reviewed through the three secondary factors or modalities of neurotic reactions, show as follows: asthenic (anxiety) factor is present in an above average value in 20 examinees. Conversive, as also sthenic (aggressive) factor are present in an above-average value in 9 examinees, and 10 examinees manifest the above-average presence of all three factors. Evidently, the most frequently manifested factor is the asthenic factor, which is characterized by anxiety, hypersensitivity and depressiveness.

Since the low self-respect is often mentioned as one of the characteristics of drug addicts, in this research we have also applied Rosenberg's Self-Respect Scale. The mean value on this Scale for 37 examinees is 23.57. This result is statistically significantly lower than the standard values ( $M = 27.95$ ;  $s = 5.92$ ), with the risk level of 5%. However, the quoting of individual answers on separate scales is perhaps more interesting. Namely, the answers on 4 of 10 scales show an extraordinary conformity, while the results on other scales are heterogeneous in the sense of agreement or disagreement with the offered statements. As the results were obtained from a relatively small number of examinees, generalizations would not be justifiable. Nonetheless, these results are still indicative.

Statement No. 2 - **I would like to have more self-respect** - 30 examinees recognize as fully correct in relation to themselves. 26 examinees fully agree with the statement - **I feel that I have the same capabilities as majority of other people**. Answers to the Statement No. 8 - **I feel that I possess a number of worthy qualities** - show great homogeneity, as many as 31 of the examinees regard it as fully correct in relation to themselves. Similarly, 30 examinees regard as fully correct the Statement No. 10 - **I think that I am worth at least equally as much as other people**.

Since the results are based on a small and very heterogeneous sample, it is difficult to make any conclusions. Still, most probably, the support of their friends and family, and sometimes of the community, could strengthen the beliefs expressed in the above mentioned statements and help the drug addicts in their attempts to change their behaviour. Maybe the heightening of self-respect at an earlier age could have influenced their decision at the moment of their first encounter with drugs and maybe even more their decision to continue with such behaviour.

## CONCLUSION

On the basis of collected results it is possible to establish the existence of some risk factors in this group of examinees. Broken family unity; early consummation of alcohol; low achievement in school, stressful position of the firstborn child; lack of religious upbringing; lack of self-respect; pronounced neuroticism - all of these factors have manifested themselves within the group of heroin addicts who have participated in this research. However, about one third of the examinees were exposed to just one or even none of the above mentioned risk factors. More detailed examination of possible other risk factors (social, psychological and biological) in a larger sample would certainly allow better understanding of drug addicts' behaviour.

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