

Emotional Stability among Alcohol Abusers

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Abstract: ***Aim:** Emotional stability refers to the process in which the personality is consistently striving for greater sense of emotional health, both intra-physically and intra-personally. The most outstanding mark of emotional stability is the ability to bear the stress. This paper aims to examine the level of emotional stability among alcohol abusers. **Design:** The present study is based on the sample of 60 subjects equally divided into two groups on the basis of marital status (Married and Unmarried), further these two groups were also divided into two more sub groups on the basis of socio economic status (High socio-economic status HSES and Low socio-economic status LSES). Emotional stability questionnaire designed and developed by Sanjay Vohra was used for data collection. Mean, SD and t-test were applied for statistical analysis. **Results:** Results revealed that there is a significant difference found between the mean scores of married and unmarried alcohol abusers. Also there is a significant difference found between the mean scores of high socio economic status and low socio economic alcohol abusers. **Conclusion:** On the basis of the findings in the present study we may conclude that both marital status and economic status are influential factors in emotional stability.*

Key Words: Emotional Stability, Marital Status, Socio Economic Status.

1. BACKGROUND:

According to Smitson (1974) emotional stability refers to the process in which the personality is consistently striving for greater sense of emotional health, both intra-physically and intra-personally. The most outstanding mark of emotional stability is the ability to bear the stress. It has been emphasized that the emotionally stable individual has the capacity to withstand delay in satisfaction of needs, ability to tolerate a reasonable amount of frustration, and is capable of revising or delving his expectations in terms of demands of the situations.

Alcohol is a colourless, volatile, flammable liquid which is the intoxicating constituent of beer, wine, spirits and other drinks. Alcohol is no ordinary commodity but a drug that can be depended upon (Gureje *et al*, 2007). Alcoholism is defined as a chronic disability manifested by continuous drinking. It is a chronic illness characterized by habitual drinking of alcohol to a degree that it interferes with physical or mental health or occupational or with normal social functioning. The sudden increase in alcohol abuse is caused by a change in cultural and social factors whereby rules and regulations that guarded its abuse have broken down. Other possible causes of alcohol abuse are the harsh economic conditions that face the community and high inflation rates as the prices of commodities are rising.

Casswell *et al.* (2003) examined socio economic status and drinking patterns in young adults. The findings indicate that lower social status was not related to frequency of drinking but was instead associated with consuming higher quantities of alcohol per drinking session, and that quantity of drinking was most strongly influenced by educational achievement. Compton *et al.*, (2007) found that people with substance use disorders are often dependent on or abuse more than one substance, and illicit drug use disorders without lifetime alcohol use disorders are rare. Results also reveal that both drug and alcohol use disorders occurs often co morbidly with depressive and anxiety disorders. Dubow *et al.*, (2008) found that lower levels of behavioural inhibition and higher levels of aggression in childhood predicted adulthood alcohol use and problem drinking, whereas childhood contextual variables such as family socioeconomic status were weaker predictors, also highlighting the importance of individual characteristics. Fleury, Grenier, and Bamvita (2014) revealed that drug and alcohol abuse among users with severe mental disorders was associated with being non-French speaking, younger, male, a resident in autonomous housing, or an individual with less functionality and high severity of needs. Results also reveal that substance abuse among users with severe mental disorders is associated with greater severity of needs and lower community functionality. Ferguson & Boden (2011) reported that there are many obvious and well researched risks of heavy drinking, injury or death, including car accidents, crime, violence, injuries, sexual risk taking including unprotected and unwanted sex leading to sexually transmitted infections (STI), pregnancy and abortion as well as mental health disorders like depression and suicidal behaviour. Gaunekar, Patel & Rane (2005) found that an important consequence of alcohol consumption in developing countries is related to mental health of individuals living with problem drinkers. Results also reveal that developing countries have shown higher levels of family dysfunction and family violence among alcohol-dependent people and

alcohol abusers. Langley and Kypri (2003) revealed that youth that involved in the alcohol consumption often has problems with the social integration, are more prone to fighting and are more often resisted to participate in healthier activities. Results also revealed that youth has a higher risk of being involved in illegal activities and participating in unprotected sex. Koob *et al.*, (2006) found that low doses of alcohol produce heightened activity (such as increased sociability and talkativeness) and disinhibition (release of inhibitions, reduced tension), whereas higher blood alcohol levels produce increasingly more emotional instability and impairment in cognitive, perceptual and motor functions. Still higher doses cause ataxia, blackouts, impaired reaction time and sedation. Mulder (2002) suggested that two broad bands of personality, impulsivity/novelty seeking and neuroticism/negative emotionality, are associated with alcoholism. Although high risk studies have repeatedly shown that sons of male alcoholics are at increased risk of alcoholism, whether this risk is related to personality variables is unclear. Negative emotionality seems to be less important and may largely be a consequence of the alcoholism itself. The most vulnerable to alcoholism may be those with both high impulsivity/high novelty seeking and high neuroticism/negative emotionality. Sekaran (2003) revealed that among youth, the young people drink less frequently than older people. However, young people are more likely to exceed the daily benchmarks where, 36% of men aged 16-24 had drunk more than 4 units on at least one day compared with 20% of men aged 65 and over. Zeigler *et al.*, (2005) and Bellis *et al.*, (2005) reported that youth who are engaged in alcohol and drug use are at greater risk of lifelong negative consequences, especially when these persons start using at a very young age. Because the teenage brain is still growing and changing, drug and alcohol use at an early age have a greater potential to disrupt normal brain development. The most affected brain regions include the hippocampus, related to learning and memory and the prefrontal cortex, responsible for critical thinking, impulse control, planning, and emotional regulation.

2. METHODOLOGY AND DESIGN:

Problem: - To assess the level of emotional stability among alcohol abusers.

Objectives

- To assess the level of emotional stability among married and unmarried alcohol abusers.
- To assess the level of emotional stability among high and low socio economic status alcohol abusers.

Hypotheses

- There would be no significant difference between the emotional stability scores of married and unmarried alcohol abusers.
- There would be no significant difference between the emotional stability scores of high and low socio economic status alcohol abusers.

Variables

In the present study the experimental variable was emotional stability and the criterion variable was marital status and socio economic status.

Sample

In this study total number of samples were 60 equally divided into two groups on the basis of marital status 30 married and 30 unmarried. Further these two groups were equally divided into two more sub groups on the basis of socio economic status (high and low socio economic status).

Tools

In this study emotional stability questionnaire designed and developed by Sanjay Vohra was used for data collection.

Procedure

In the present study the researcher investigated the level of emotional stability among alcohol abusers. Sample of 60 subjects were selected through random sampling method. The whole data was obtained using emotional stability questionnaire designed and developed by Sanjay Vohra. The whole procedure of filling the inventory was explained to subjects very clearly. Also the instructions given on the inventory were clearly explained to the subjects. The scores were assigned for different responses according to the items. The scores were arranged in tabular form first then t-test was applied for statistical analysis. Also mean and SD value of every group was calculated as shown in the following tables.

3. RESULTS:

The results of the present study are shown in tables given below.

Table – 1

Showing Mean, SD and t-value of Emotional stability scores of married and unmarried subjects

| Groups | Total score | N | Mean | SD | df | t-value |
|-----------|-------------|----|-------|-------|----|---------|
| Married | 140 | 30 | 4.666 | 1.154 | 58 | 6.757 |
| Unmarried | 77 | 30 | 2.566 | 1.250 | | |

Table – 2

Showing Mean, SD and t-value of Emotional stability scores of high socio economic status and low socio economic status subjects

| Groups | Total score | N | Mean | SD | df | t-value |
|----------|-------------|----|-------|-------|----|---------|
| High SES | 130 | 30 | 4.333 | 1.446 | 58 | 3.870 |
| Low SES | 87 | 30 | 2.900 | 1.422 | | |

4. DISCUSSION:

The present study aimed to assess the level of emotional stability among alcohol abusers. For that purpose 60 subjects were selected in Baramulla District of Jammu and Kashmir State, obtained data was analyzed by using t-test. The obtained results show that there is a significant difference found among married and unmarried alcohol abusers. The mean scores of married and unmarried alcohol abusers were found 4.66 and 2.56 respectively and the t-value is found 6.75 with df 58, which was found significant at any level of significance. This indicates that there is a significant difference found among married and unmarried alcohol abusers. Therefore our first hypothesis that there would be no significant difference between the emotional stability scores of married and unmarried alcohol abusers is rejected.

The obtained results also show that there is a significant difference found among high socio economic status and low socio economic alcohol abusers. The mean scores of high socio economic status and low socio economic alcohol abusers were found 4.33 and 2.90 respectively and the t-value is 3.87 with df 58 which was found significant at any level of significance. This indicates that there is a significant difference found between the mean scores of high socio economic status and low socio economic alcohol abusers. Therefore our second hypothesis that there would be no significant difference between the emotional stability scores of high and low socio economic status alcohol abusers is also rejected.

5. CONCLUSION:

On the basis of the findings in the present study we may conclude that both marital status and economic status are influential factors in emotional stability.

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