



Psychological Mechanisms of Development of Addictive Behavior

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Abstract

Nowadays, drug addiction is one of the most common forms of social epidemic in the world, especially in adults case. Understanding the biophysical aspects of drug addiction, as well as examining drug addiction rehabilitation in the late twentieth century, have shown that along with the medication for the treatment of psychosis, it is also necessary to have a psychotherapy.

All the specialists working on this problem agree that any kind of addiction is an attempt by the individual to solve psycho-biological or animal-related problems, that is, negative affect relatively a way of overcoming, emotional self-regulation. Consequently, efforts should be made to correct the motivational-behavioral field of addicts and to address socio-psychological problems, well it makes then effect on their educational development also. Psychologically addictive behaviors as illusory-compensatory behaviors have led to a significant change in the hierarchy of behaviors, substantially personal deformities, social contacts and relationships. The purpose of psychotherapy is to reduce it, as this condition is considered to be the most important factor in drug use. If the rehabilitation program does not provide a clear answer to the question of what the drug will cost in return, the program is less effective.

Therefore, the aim of the study was to empirically study the life-cycle orientation, psycho-protective mechanisms and personal profile of drug addicts. To study life orientation, the Crambo & Macholik test was used to examine psychological protection mechanisms - the Kellerman-Plutchik test, and to establish a personal profile - the C-form of the 16-factor Kettle test. A total of 135 people were interviewed, including 35 drug addicts.

It is established that the addict is characterized by the deformation of the motivational-thinking sphere, which implies an interest, a purpose in life, a vital development. Oppression and the horrors of life, back to oneself and to life. The mechanisms of psycho-psychological protection that develop in ontogenesis as a means of adaptation and resolution of internal conflicts, in the case of addiction Mutual state - Disease-Adaptation. The deformation of the psychological protection structure provides powerful ways of blocking reality: the ability to critically reduce one's own illness dramatically decreases. The psycho-psychological protection system does not allow the drug-addict to adequately understand the severity of drug use, which, in turn, it helps to deepen pathological forms of deformity and behavior. Personal profile of drug addicts is developed. Being addicted to alcohol is an emotionally unstable, more primitive, more timeless, more rigid, less practical, more primitive Worldview, harassment of intellectual interests, lower self-control, weak nebulous regulation, low self-discipline, impulsivity, Affect-it. Predictors of the effectiveness of psychoactive therapy within the framework of the addictive rehabilitation program have been addressed.

Keywords: Addictive Behaviour, Psychological Protection Mechanisms, Motivational-Value Sphere, Life Scale.

Introduction

The role of psychological factors in the development and dynamics of drug addiction is widely acknowledged: an addict is a person who cannot tolerate pain and emotional stress (behaviorism), has an inner feeling of hopelessness. (Cognitive approach), it is characterized by weakness of the "I" in the face of pain and frustration (psychoanalysis), serious internal conflicts (transactional analysis). Addiction is a reaction to existential frustration, a protest against social pressure, boredom, the inability to self-realize (Humanism-Tur psychology). Despite the different approach to the problem of addiction, there is a common point: the emergence of addiction is seen as a reaction to an unbearable internal situation, the main feature of which is an intense negative affect. Therefore, addiction is an attempt to solve psychological or life-biological problems, that is, a self-destructive way of overcoming negative effects, emotional self-regulation.

Psychologically, adaptation, as an illusory-compensatory behavior, causes significant changes in the hierarchy of openness, substantial personal deformation, social contacts and relationships, and so on. Therefore, rehabilitation of drug addicts has three goals: social recovery, mental stabilization and



social inclusion. After the removal of the physical dependencies, "dry addiction" remains [1]; The status quo of addicts can be described as an potential crisis, a vacuum that is considered to be the most important factor in the consumption expenditure.

It is impossible to identify the substantive "targets" of psychotherapeutic work without taking into account the motivational-value sphere of the addict and personal characteristics. In this regard, it is especially important to study such in-depth, unconscious mental activity as the style of defensive response, or the totality of the mechanisms of psychological defense, which is formed in the process of ontogenesis by typological features and specific social culture. Based on the experience of the development of the world and can be constructive or destructive. We think that in the process of narcotization, the mechanisms of destructive psychological protection are being formed, which hinders the process of rehabilitation, as it facilitates the easing of overcoming the negative effects, but a way to reduce the risk of critical assessment of both the self-esteem and self-esteem, as well as the devastating consequences of drug use. We think that in the process of rehabilitation, the field of motivational values, as well as the diagnosis of defense mechanisms may be predictably important - the course of treatment and psychotherapy to evaluate effectiveness. The aim of the present study was to test these assumptions.

Method

Participants

A total of 35 drug addicts were surveyed, with an average age of 41.7 years. Control group - a random sample of 100 non-addicted people was selected, the average age was 40.6 years. The study was conducted in Tbilisi.

Instrumentation

Purpose in Life Test (PIL), Based on Frankl's [2] theory of purpose in life, Crumbaugh and Maholick [3] developed the Purpose in Life Test to measure a person's sense of meaning.

The test was aimed at empirically verifying the provisions of the existing logotherapy and regulatory neurosurgery logos. According to Victor Frank, the search for the meaning of human life (existential frustration) and thus the sense of loss of meaning in life (existential void) to nourogene neurosis It burns. Based on the test, the authors define the psychological construct as the meaning of the ontological meaning of life - life. In the Georgian version of the test, 5 subscale were separated by factor analysis. The first three are related to the three constituent parts of life:

- 1) the goals of life (the future);
- 2) life process (present);
- 3) The result of life (past). The remaining two scales reflect internal locus control:
- 4) Representation of life control;
- 5) Ability to control your own life.

These factors (other than the other) can be considered as components of the meaning of a person's life. A similar result is obtained in the Russian version [4]; The Chinese version of the test also contains five subscales.

The Life Style Index – LSI, Plutchik, Kellerman, & Conte [6; 7]. This test was used to identify Ego-defense mechanisms. The following defense mechanisms are included: Compensation, denial, displacement, intellectualization (including undoing, sublimation and rationalization), projection, reaction formation, regression (including acting out and fantasy) and repression (including introjections and isolation). A total score, summing up all positive responses is also included, indicating an overall defensive functioning.

It was used to study personal characteristics Cattell's 16 Personality Factor Questionnaire (16PF), C form.

Statistics

All statistics were carried out by using SPSS version 23 for Windows. PIL and LSI tests, also total scores tested for normality was used One-Sample Kolmogorov-Smirnov Test. All scores to follow a normal distribution. It was used to test the differences between experimental and control set Nonparametric Test – Independent-Samples Mann-Whitney U. Factor Analysis: Extraction Method: Principal Component Analysis, Rotation Method: Varimax with Kaiser Normalization. Cluster Analysis was used Two Step Cluster. For builds a predictive model for group membership used Discriminant analysis. Statistically significant intragroup difference Ego-Defense Mechanisms tested by Nonparametric Friedman Test for Related Samples Non-parametric Friedman Test for Related



Samples was used to test the statistical significance of intragroup differences by protection mechanisms and for comparison with experimental and control set - Kruskal-Wallis Test.

Results

Purpose-in-life

Comparison of experimental and control set confirmed that the difference was statistically significant for both the overall score and all five scales. In the experimental group, all scalar indicators are lower than both the control set and the population norm (Test Rate).

The aim of the next analysis was to find out whether it is possible to differentiate addicts from non-addicts based on PIL test indicators. Discriminatory analysis confirmed the predictive significance of the test: Discriminatory function sharply separated experimental and control set ($\chi^2 = 26.970$; $p = 0.000$). Classification Results showed that 68.9% of the original grouped cases were correctly classified. There are three main predictors: Total meaning score, life goals (future) and internal locus control (Representation).

Defense Mechanisms

A statistically significant difference between the experimental and control set is confirmed by the expulsion ($U = 1170.500$; $p = 0.003$), compensation ($U = 1254.500$; $p = 0.012$) and reactive formation ($U = 1104.000$; $p = 0.003$) In my opinion: in the group of experimental, the rate of expulsion and reaction formation is higher, and the rate of compensation is lower.

Related Samples Friedman's Two-Way Analysis of Variance by Ranks confirmed the intrinsic difference between the frequency of use of protective mechanisms in both control ($\chi^2 = 90.706$; $p = 0.003$) and in the experimental group ($\chi^2 = 14.949$; $p = 0.049$). The first group in the control group is the Intellectualization (64), with the addicts - the reactionary formation (62), which is in the fifth place in the control group. Compensation, which ranks third in health care, ranks last with Adik-Tebe.

Factor analysis conducted to study the structure of the system of defense mechanisms revealed two factors in both groups (Cumulative Variance: control set - 62%, experimental- 56%). In the control set, the opposite forms are combined into different factors. In particular, the denial entered into the second factor, while its opposite projection - into the first; Expulsion - in the second, and replacement - in the first; Regression in the first, and intellectualization in the second, reactive formation in the second, and compensation in the first. In the group of addicts, the structure is deformed: in the first factor, the opposite substitution and expulsion are combined, and in the second, the opposite intellectualization and regression are mutually exclusive.

The purpose of the next analysis was to find out how it is possible to distinguish between control and experimental groups based on defense mechanisms. For this, a two-stage cluster analysis was performed; Eight protection forms and the categorical Variable Group were used as predictors. As a result of the classification, two clusters were identified: The "group" was considered to be the most important predictor of the separation of experiments. According to the importance of separating these two groups, eviction is in the second place, compensation is in the third place, and regression is in the last place.

Finally, Discriminant analysis is used to build a predictive model for group membership based on LSI scores. The dissociative function separated the addicts and control groups ($\chi^2 = 24.806$; $p = 0.002$). Classification Results showed that 68.1% of original grouped cases were correctly classified. There are four main predictors: compensation (-0.243), reactive formation (0.241), intertextualization (-0.230), and expulsion (0.211). "Regression" (0.061) has the lowest contribution.

Personal characteristics

Cattell's 16 Personality Factor Questionnaire found a statistically significant difference between control and experimental groups by eight factors: C (5.44 and 2.54; $p = 0.000$), F (6.01 and 4.35; $p = 0.020$), I (5.29 and 4.06; $p = 0.002$), M (5.38 and 4.03; $p = 0.019$), Q1 (5.23 and 3.94; $p = 0.019$), Q3 (5.63 and 3.27; $p = 0.000$).

Discussion

All indicators of the PIL test in the addicts' group are valid for both the control group and the population norm, which means that the addict has no future goals - he only lives in the present day; I am unhappy with my past life. He considers himself a weak person, who is not able to control his own life. The addict is a fatalist: he is convinced that conscious control of life is impossible, the choice is only an



illusion, so planning for the future is meaningless. Such a picture indicates the deformation of the addictive motivational-behavioral sphere, which implies the vitality of the interests of the life, the goals of life. Dissatisfaction with oneself and life.

The results of the discriminatory analysis give us the right to say that the Purpose in Life Test (PIL) reveals "targets" for psychocorrective or psychotherapeutic work with addicts. Representation of one's self is the leading factor, the personal resource, through which the process of self-regulation is mediated [8; 9] and, consequently, the motivation to refrain from drug use. Long-term treatment after treatment is indicated for patients who have been subjected to life-saving goals and well-being following psychotherapy. Critical Assessment of Rey Chapter or Kme-Deb [10; 11; 12]. Objectives and the idea of life can be considered as a resource that will contribute to the stability of the regime. A person who is ready to be recognized and recognized as the cause of his or her particular problem is likely to have a more poetic approach to treatment.

The leading defense mechanism in the control group is intellectualization - a form of mature, defensive protection based on the fear of losing control. At the first level with the addicts is the reactive formation, which is the leading defense mechanism in the case of mania disposition, which is a joyous emotion; For this type of person, it is important to keep in mind the need to receive memorable stimulus- Hedonism. It is a less sophisticated, protectionist mechanism that prevents the penetration of anxiety-causing into consciousness and alters them. (Unconscious inversion).

The addict uses the mechanism of expulsion protection much more often than the non-narcotics addict. Eviction is a less mature, protectionist protectionism; The emotion of fear is fear. It is designed to relieve anxiety and prevent the emotions or trials associated with it. To prevent entry. A non-drug addict uses the mechanism of protection of the Commonwealth more often than the addict. Compensation should be avoided to avoid depressive feelings - this is a sufficiently high level of self-preservation and a suppressed state of mind. Bis means of overcoming. Addicts "universal compensator" - narcotics perform this function with addicts: Addict under the influence of narcotics is inaccessible to unpleasant feelings.

Reactive perception and expulsion, in fact, serve one purpose - to distort reality, or to prevent the penetration of negative information into consciousness (one's own senses, expected masterpieces, etc.). The addict is not ready to perceive and introduce objective information about himself and his illness. The results confirm that the mechanisms of psycho-logical protection have been transformed by adapting to the new attitudes of the person in order to form an addiction.

In the case of addiction, the structure of the system of psychoanalytic defense mechanisms is deformed: Factor analysis has shown that the forms of border protection with non-dependent probes are different factors. It unites, while in the group of addicts the opposite factor is combined in the first factor, and in the second - the opposite intellectualization and regression.

Discriminatory analysis confirmed the predictive value of The Life Style Index (LSI). The developed forecast model identified four main pre-dictatorships: compensation, reactionary creation, intellectualization, and expulsion.

Very low rates of emotional stability and self-control are particularly prominent in the Adyghe profile - 2.54 and 3.27 standart tens. In comparison with Jelmr-Tel, the addict is emotionally more volatile, more forward-looking, carefree, emotionally less sensitive, less practical. . It reflects a more primitive worldview, low frustration tolerance, and low self-control.

Conclusion

Research has shown that addiction is a form of personality development. The addict person is characterized by a de-formation of the motivational-behavioral sphere, which implies a major duality of life - in Sacrificing the goals of life, the vitality of life, and the meaning of life in general, self-sacrifice and life-sacrifice. The addict person is characterized by a system of destructive psychologically protective mechanisms: as a result of the formation of the addict, the mechanisms of psychological protection are transformed into new forms of personality.

Ego-defense mechanisms, which develop in ontogeny as a means of adapting and resolving internal conflicts, cause a state of emergency in the event of an addiction-De-adaptation. The distortion of the psychological protection structure provides powerful ways to block reality: the ability to critically assess one's own illness is drastically reduced. The Psychological Protection System The drug addict does not allow him to properly understand the severity of drug use, which in turn contributes to personality deformity. Deepening of pathological forms of cold and behavior.

PIL and LSI tests can be used as part of drug rehabilitation program to assess the effectiveness of psychotherapy. Presumably, the PIL test can also be used for prevention purposes - to identify



individuals at high risk of developing addiction. This assumption is based on the popular belief that the personal pronouns of the addict belong to a number of pro-radical phenomena.

References

- [1] Korolenko C.P., Dmitrieva N.V. Addictiveology. Novosibirsk: 2012.
- [2] Frankl, V. E.. Man's search for meaning. Moscow: Progress. 1990.
- [3] Crumbaugh, J. C., & Maholick, L. T.. Manual of instructions for the Purpose-in-Life Test. Munster: Psychometric Affiliates. 1969.
- [4] Leontiev, A. (2006). Meaninglife Orientation Test. Moscow: Smisl; 2006.
- [5] Shek D., Hong E., Cheung M. The Purpose in Life Questionnaire in a Chinese Context//The Journal of Psychology, v. 121, 1987, №1. P. 77-83.
- [6] Plutchik, R., & Kellerman, H. (Eds.).. Emotion: Theory, research, and experience. Vol. 1. Theories of emotion. New York: Academic Press. 1980.
- [7] Conte H, Apter A. The Life Style Index. A SelfReport Measure of Ego Defenses. In: Conte H, Plutchik R, editors. Ego Defenses: Theory and Measurement. New York: Wiley; 1995.
- [8] Beck A. T., Rush, A. J., Shaw B. F., Emery G. Cognitive therapy of depression. New York: Guilford Press, 1979.
- [9] Ellis A., Dryden W.. Practice rational-emotional behavioral therapy. St. Petersburg: Rech. 2002.
- [10] Waisberg, J. L.. Purpose in life and outcome of treatment for alcohol dependence. British Journal of Clinical Psychology, 33(1), 1994. P. 49-63.
- [11] Vinnikova M.A. Remission for heroin addiction (clinic, stages of current; prevention of relapses). Moscow, 2004.
- [12] Zentsova N. I. System Model Psychological Step Work of Aids. Moscow, 2015.