Comparing Personality Traits, Coping Strategies, and Attributional Styles of Opioid-Dependent Patients and Healthy People

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**Abstract**

**Objective:** This study is carried out to compare personality traits, coping strategies, and attributional styles of opiate-dependent patients and healthy people.

**Materials & Methods:** In this cross-sectional and comparative research, three scales Eysenck Personality Questionnaire RS (EPQ-RS), Coping Response Inventory (CRI), and Attributional Style Questionnaire (ASQ) are used to measure the mentioned variables on 158 people (78 opiate-dependent patient and 80 healthy people) selected by accessible sampling method. Research data were examined on the basis of T-test for independent groups and logistic regression.

**Results:** Results of T-test showed that there were significant differences between healthy and patient group in Coping Response Inventory and Personality Traits Subscale (except Lying subscale) and attribution styles for negative events (P<0.001). Logistic regression results showed that all of these variables which entered in model, are able to predict distinction one group from other; patient group and healthy one in a meaningful way (P<0.001).

**Conclusion:** Opiate-dependent patients when they face problems significantly use problem-solving strategies, social support seeking, and cognitive evaluation significantly less than healthy group and use physical inhibition and emotional inhibition significantly more than the healthy group. Also, drug-dependent patients in terms of tendency to Neuroticism, psychoticism and introversion were significantly higher than the healthy group, and they had more pessimistic attributional style towards negative events. On the other hand it became apparent that some aspects of personality characteristics, coping strategies, and attributional style considerably were able to distinguish healthy people from opiate-dependent patients.

**Keywords:** personality traits, coping strategies, attributional styles, opioid-dependent patients