

وزارة التعليم العالي والبحث العلمي هيئة البحث العلمي مركسز البحوث النفسية

مجلة العلوم النفسية

مجلة علمية فصلية محكمــة معتمـدة تصدر عن مركز البحوث النفسية

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العلوم النفسية

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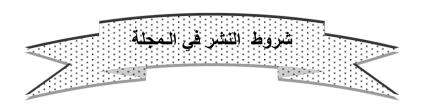
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مجلة العلوم النفسية
مجلة علمية فصلية محكمة معتمدة متخصصة تصدر عن
مركز البحوث النفسية
جمهورية العراق
قسيمة اشتراك
أرجو قبول اشتراكي في مجلة العلوم النفسية :
لمدة () سنة ابتداءاً من
الأسم :
العنوان:
قيمة الاشتراك:
طريقة الدفع :- نقدا () شيك () حوالة بريدية ()
رقم: تأريخ / /
التوقيع:

الأفراد :(125000) الف دينار عراقي داخل العراق
(100) \$ او ما يعادلها خارج العراق
للمؤسسات أو المؤتمرات : (90.000) الف دينار عراقي داخل العراق

(70) \$ او ما يعادلها خارج العراق

قيمة الأشتراك لعدد واحد



أولا: تتشر المجلة الأبحاث والدراسات الأكاديمية القيمة والأصيلة باللغتين العربية والأنكليزية في حقل مجالات أهتمام المجلة نفسيا وتربويا، والتي لم تقبل أو تتشر سابقا ،ويتحمل الباحث المسؤولية القانونية في كل القضايا المتعلقة بالأمانة العلمية أذا كان بحثه منشور أو قدم للنشر.

ثانيا: يخضع كل بحث مقدم للنشر في المجلة الى الأستلال الألكتروني على أن لاتزيد درجة الاستلال عن (20).

ثالثا: يقدم الباحث المقبول بحثه للنشر في المجلة تعهد خطي بعدم نشر بحثه في مجلة آخرى أو حصوله على قبول نشر مسبقا.

رابعا: يقدم البحث مطبوعا على نظام (Word 2007) مصحوبا بالعنوان للبحث مع أسم الباحث الثلاثي واللقب العلمي والأختصاص وأسم الجامعة والكلية والقسم والبريد الألكتروني في بداية الصفحة الأولى للبحث باللغتين مع خلاصة للبحث باللغة العربية والأنكليزية مثبت فيها عنوان البحث واسم الباحث ومكان عمله على أن لاتزيد عن (250) كلم ققط .

خامسا: يجب أن لاتتجاوز عدد صفحات البحث المقدم للنشر في المجلة أكثر من (25) صفحة فقط بما فيها الجداول والأشكال والملاحق ، وبخلافه يتحمل الباحث مبلغا أضافيا مقداره (2) الفين دينار عن كل صفحة أضافية ، ولايتجاوز البحث بعد الزيادة عن (35) صفحة بكل الأحوال .

سادسا: موافقة أثنين من المحكمين المختصين الذين يقومون البحث علميا قبل نشره ، بالأضافة الى تقويم البحث من ناحية اللغة العربية والأنكليزية .

سابعا: يراعي في كتابة البحث الآتي :

1- الأصول العلمية في كتابة البحث من حيث الدقة في التوثيق والأمانة العلمية في العرض.

2- يقدم البحث بنسختين مطبوعة على ورق أبيض (A4) مطبوعة على الحاسوب
 وعلى جهة واحدة من الورقة مع قرص (CD)، بالمواصفات الآتية :

- الحاشية العليا 4.50 سم.
- الحاشية السفلى 4.50 سم .
- الحاشية اليمنى 3.75 سم.
- الحاشية اليسرى 3.75 سم .

- يكون الخط المستخدم نوع (Meersoft Word)، حجم الخط (14) بالنسبة للمتن و (12) بالنسبة للجداول .
 - تحتوي كل صفحة على (22) سطر فقط وفقا لبرنامج التنضيد .
 - يكون التباعد بين الأسطر للصفحة الواحدة (1.15).
- تكون الأشكال والجداول واضحة ، وتستخدم فيها الأرقام العربية والنظام العالمي للوحدات .
- يكون البحث خالي من الأخطاء اللغوية والنحوية ولاتتحمل المجلة مسؤولية ذلك .
- لا تستعمل الهوامش في أسفل الصفحات وأنما يشار رقميا الى المصادر حسب موضوعها في نهاية البحث من خلال ذكر أسم الباحث والسنة وعنوان البحث من جهة النشر والطبعة وتكتب بأسلوب (APA)...مثال
- الهاشمي ،عدنان علي (2009). تحمل المسؤولية الأجتماعية وعلاقتها بأتخاذ القرار لدى التدريسيين في الجامعة ،رسالة دكتوراه غير منشورة، جامعة..... كلبة ، قسم
- يلتزم الباحث بدفع مبلغ قدره (125) الف دينار من داخل العراق ،و (100) دولار أمريكي من خارج العراق .

- يلتزم الباحث بالتعليمات المؤشرة من الخبراء ،ويعيد الباحث النسخة الأصلية للمجلة مع نسخة جديدة ورقية آخرى مصححة .
 - لاتعاد البحوث الى أصحابها قبلت أم لم تقبل للنشر.
- لايزود الباحث بكتاب قبول النشر ، الأبعد التزامه بالتعليمات أعلاه وتسليم النسخ الورقية كافة .
- المجلة غير مسؤولة عن نشر الأبحاث بعد مرور (90) يوم من دون مراجعة الباحث للمجلة والتزامه بالتعليمات كافة .
- ثامنا : تحتفظ المجلة بحقها في أن تحذف أو تعيد صياغة بعض الكلمات أو الجمل بما يتلأئم مع أسلوبها في النشر .

تاسعا: تتنقل حقوق نشر البحث الى المجلة حال أشعار الباحث بقبول بحثه للنشر.

مجالات اهتمام المجلة

2525252525252525252525

- 1. البحوث والدراسات في مجالات العلوم التربوية والنفسية بفروعها المختلفة والطب النفسي، و الباراسايكولوجي .
- 2. المؤتمرات والندوات العلمية الوطنية والعربية والعالمية التي تعقد حول التخصصات في الفقرة المذكورة اعلاه
- 3. نشاطات وفعاليات المركز والمؤسسات الاخرى التي تهتم بالمجالات الواردة في الفقرة (1).

((في هذا العدد))

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وزارة التعليم العالي و البحث العلمي هيئة البحث العلمي مركز البحوث النفسية

وحدة الاصدارات والمطبوعات

ملاحظة...

الافكار الواردة في البحوث والدراسات المنشورة تُعبر عن آراء أصحابها وليس بالضرورة عن رأي المجلة.

المراسلات

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رقم الإيداع في دار الكتب والوثائق

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Addiction-Prone Personality Among University Students in Iraq

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ABSTRACT

The current paper aims to identify the prevalence of addictionprone personality (APP), measure the level of addiction-prone personality among university students in Iraq, and examine if there statistically significant differences according to gender. To achieve these goals, a sample of 1000 students, both males females, from various Iraqi universities was used to identify the prevalence of addiction-prone personality, and another sample of (400)students was used to measure addiction-prone personality among students. After reviewing the literature, a scale has been developed for this research, and after statistically processing the data, this research concluded that the percentage with a high proneness to addiction was %17.6, and this percentage can be considered moderate. There were statistically significant differences no according to gender variable.

Keywords: Addiction-prone personality; university students; addiction



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وزارة التعليم العالى والبحث العلمي/مركز البحوث النفسية

ملخص البحث

استهدف البحث الى التعرف على نسبة أنتشار الشخصية المعرضة للادمان، وقياس مستوى الشخصية المعرضة للادمان لدى طلبة الجامعة ، فضلا عن التعرف على دلالة الفروق في الشخصية المعرضة للادمان تبعا لمتغير (الجنس) ولتحقق هذه الاهداف تم أعتماد عينة بلغت (1000) طالب وطالبة للتعرف على نسبة الانتشار، وعينة أخرى بلغت (400) طالب وطالبة لقياس الشخصية المعرضة للادمان، وقد لجأ الباحثون الى بناء اداة القياس بالاعتماد على عدد من المقايس الاجنبية ذات الصلة، وبعد معالجة البيانات أحصائياً توصل البحث الى ان نسبة الافراد الذين لديهم مستوى عالى من الشخصية المعرضة للادمان والبالغة (17.6%)، وأن مستوى الشخصية المعرضة للادمان معتدل أو متوسط، في حين لم يظهر فرق دال أحصائياً حسب متغير الجنس.

الكلمات المفتاحية: الشخصية المعرضة للادمان، طلبة الجامعة، الإدمان.



INTRODUCTION

Addiction is one of the major challenges that societies face on health, social, and psychological levels, and it is also among the most pervasive mental health problems in contemporary societies. As such, addiction has been the subject of research for decades. Numerous research articles and papers have been written on this topic, and many point to the harmful consequences that addiction has on individuals and societies at large, including, for example, homicide and violence, abuse, vehicle accidents, and disruption of family life and careers (Zuckerman, 2012). Moreover, addiction affects the human mind and behavior and has a complex nature in which many factors are environment. intertwined. including genetics, and individual of the experiences. Regardless population involved, drug substance problems often prove to be both integral to the individuals' personal lives and difficult to assess in clinical practice. Thus, a thorough understanding of the problem of addiction in terms of biological, social, and psychological factors is needed in order to address its consequences and negative effects.

Recently, addiction has become more pervasive. As The United Nations Office on Drugs and Crime's World Drug Report (2015) shows, one in 20 people aged 15 to 64 used illegal drugs; 1 in 3 was female, and more than 1 in 10 were problem users. Hence, it is necessary to plan strategies for the prevention of drug use, taking into account the context in which it occurs, especially the vulnerability of youth. For example, of all age groups, underage drinkers (18–20year-olds) and young adults (21-30-year-olds) consume the largest amount of alcohol and have the highest rates of heavy drinking (Foster et al., 2003; Naimi et al., 2003). Moreover, college students are generally in an age group that has the highest rate of binge drinking and are at a higher risk for heavy drinking than their peers who are not college students. Addiction is also associated with higher risks of acute health problems such as serious injuries, particularly those resulting from car crashes, assault, aggressive behavior, and a of drinking-related social and psychological problems (Wechsler & Isaac, 1991; Wechsler et al., 1994).



The concept of addiction is complex, and the meaning of this term has been debated both by scholars and by the public. Most typically, the idea of addiction has been applied to substance use behavior and is shown in scientific nomenclature in the criteria for substance defined dependence disorder as in the American **Psychiatric** and Statistical Manual. Association Diagnostic Hence. Diagnostic and Statistical Manual of Mental Disorders lists seven criteria and suggests that dependence is present when three or more have occurred within the last 12 months. The criteria are: "(1) withdrawal:(3) often consuming more was intended; (4) persistent desire or unsuccessful efforts to cut down; (5) spending a great deal of time with drug-related activities;(6)giving up occupational, recreational important social, or activities:(7) continuing consumption despite physical or psychological (2013).

In general terms, addiction is a pattern of repetitive habit that increases the risk of disease and/or is associated with personal and social problems. On a personal level, it is a loss of control that persists despite voluntary attempts to eliminate it. For example, people are known to develop addictions to eating, gambling, drinking, smoking, and work (Vaghefi 2013). More specifically, addiction may be defined as:

a process whereby a behavior, that can function both to produce pleasure and to provide relief from internal discomfort, is employed in a pattern characterized by (1) recurrent failure to control the behavior (powerlessness) and (2) continuation of the behavior despite significant negative consequences (unmanageability). (Goodman, 1990, p.1403)

Iraqi society, like many countries in the region, is currently fighting against the growing problem of addiction. It is noteworthy to mention that Iraqi people lived under harsh and unforgiving conditions on political, economic, social, and cultural levels for decades. The lack of stability for several decades, the violence, sectarianism, and the distrust in the justice system have set the ground



addiction problem. Also, in light of the rapid for a growing developments in the world of technology and the absence of oversight, as well as the prevalence of social media, all have created an environment that allows for addiction, especially in youth. These factors and others have affected Iraqi society, youth in particular, and resulted in the emergence of many negative behaviors, including addiction, which has spread at an accelerating pace after the 2003 war. As a result of various reasons, including the lack of control over the Iraqi borders, which opens the door for drug trade, less adherence to religious and family values, corruption, today's youth in Iraa face the challenge of having access to drugs of various types with poor oversight, hence falling victims to addiction with ease. Given the size of the problem for both individuals and Iraqi society in terms of loss of life, health, productivity, and vast economic cost, ways to identify and provide better prevention and early intervention are much needed, which this paper addresses.

are very few studies However. there in Iragi society addressed addiction in youth. For example, Jabir (2018) examined the reasons for the spreading of drug addiction in Iraq from the viewpoint of university students, and Al-Aboudi (2020) studied drug addiction in teens and its security and social reflections. Al-Itabi (2021) also explored youth attitudes towards drug addiction. Scholarship in Iraq has rarely studied the preventative aspect of addiction and its ramifications on different age groups. Proneness to addiction is also understudied. The current study aims to fill in this gap to address the proneness to addiction among university students, examine traits for those prone to addictive personality, and identify the statistically significant differences in terms of gender.

For decades, and across various disciplines, the concept of an 'addictive personality' has been discussed and debated (for example, Nathan, 1988; Berglund et al., 2011; Lester & Narkunski, 1978; Eysenck, 1997). Research indicates that certain personality traits increase a person's chances of becoming addicted. It is easy to think that it is the personality traits themselves that cause addiction; however, the problem is complex and multifaceted. Findings suggest



that research involving underlying vulnerability and its measurement could significantly contribute to clinical applications in prevention and early intervention. This is particularly relevant for young adults who appear to be at highest risk for developing addiction and substance abuse disorders. It is also important to note that addiction has many contributing factors, including genetics, environment, and individual experiences. Like other chronic problems in addiction often addiction. proneness to involve and cycles. Nevertheless, without treatment, addiction progresses and may lead to or premature death. More specifically, Addiction-prone personality is defined as:

a cluster of personality characteristics that tend to appear in individuals with different types of substance use and compulsive behaviors. It may be a generalized predisposition to engage in various types of addictive and compulsive behaviors different in quality and/or intensity from of the characteristics observed in the general population represented by normative groups on standardized personality instruments. (Lee, 2006, p. 499)

Research that refers to individual differences in personality traits that are associated with drug abuse reveals that these traits are not considered merely consequences of drug abuse. Specifically, many studies have shown that addiction-prone individuals are different from others in terms of personality traits, including impulsive behavior, risk-taking tendencies, sensation seeking, and a tendency toward social deviance (Wagner, 2001; Waldeck & Miller, 1997; Barnes, et al., 2000).

These findings raised significant questions. Firstly, the interest of the researchers centered on the recognition of personality traits that are associated with drug use and which differentiates drug use from personality pathology. Secondly, this change also revealed that many personality traits commonly identified in drug abusers do not show pathological processes (Wolff & Wolff, 2002). Research on this topic supports the important role of personality in addiction and drug abuse. According to Conway et al. (2003), the inconsistencies in



personality research and addiction may be considered in terms of the problems linked with the definition of drug abuse groups and the psychopathology and measurement of personality.

The traits that are associated with increased proneness to addiction describe individuals who are impulsive and spontaneous. These seek excitement and constantly search for new experiences with high sensory input. Additionally, risk-taking is another Tari where people are prone to be in situations full of risks, as well as when people feel that they are unique and different from others in terms of the values, interests, and nature of their goals, making them feel socially isolated. The lack of tangible family support when facing difficult situations is another aspect to be considered. Suffering from unusually high levels of anxiety and the inability to manage life situations and relationships with others could be another risk factor for addiction. Some attempt to escape difficult and stressful situations as they find it difficult to deal with and overcome stressful situations, which accompanied by anxiety, and when they are unable to find positive coping mechanisms to deal with such situations, there is a tendency to resort addiction to escape from reality and obtain temporary relief.

Another personality trait associated with addiction is the difficulty of taking responsibility for the mistakes individuals commit and shifting the blame for the mistake to another. Most personality trait research indicates that basic personality traits are innate and cannot be changed. Having personality traits associated with addiction does not mean that a person is destined to develop a drug or alcohol problem. These traits, however, are considered risk factors. Because is a complex interaction between various addiction factors, encompasses the cases of individuals who are vulnerable and prone to addiction and need to learn ways to channel the negative aspects of certain personality traits into a more positive direction. Therefore, prevention and early intervention can be effective in reducing the vulnerability to addiction, even in individuals with these risk factors. Individuals can learn healthy coping mechanisms and make choices that reduce their susceptibility to addiction. In addition, a supportive



and understanding environment can play a crucial role in helping individuals avoid or overcome addiction.

The fundamental strategy to recognize if there are etiologically significant traits that create proneness to addiction has relied largely on empirical methods. For example, various psychometric measures have been developed by selecting items from extant personality tests that differentiate those with drug addictions from non-affected control first prominent was the The example Alcoholism Scale (MacAndrew, 1965), based on discriminating items from the Minnesota Multiphasic Personality Inventory. Researchers have long supported the identification and screening of high-risk individuals as part of a comprehensive approach to fighting problems related to substance use. Very rarely does screening include assessment of the antecedents known to be associated with the liability to develop addiction.

Lately, however, researchers have attempted to determine if the MacAndrew (1965) Alcoholism Scale can be used as an index of general addictive tendency to measure several personality traits and behaviors common to individuals who are addicted to substances or activity. Research also focused on the measurement of personality traits associated with an underlying vulnerability to abuse/addiction, which has met with mixed success. The research has culminated in the development of a tool to measure the vulnerability to addiction or addiction proneness, the Addiction Prone Personality Scale (Barnes et al., 2000; Anderson, 2003), as a way of identifying those at risk for developing addiction. This study also developed a scale to measure addiction-prone personality that fits the Iraqi environment, as will be illustrated in the following sections.

PROCEDURES

Study 1: Developing a Scale to Measure Addiction Prone Personality

The sample of the research paper included (1000) students; 272 were males, and 728 were females who answered the items of the scale electronically from several Iraqi universities. The sample was



used to explore the factor structure for the **Addiction Prone Personality Scale** (APPS) developed in this study. The ages of participants ranged from (18-28), as shown in table (1).

Table (1)
Sample distribution according to gender, and specialization

N	Males	Fe	emales	
Science	Humanities	Science	Humanities	Total
162	110	162	566	1000

Instrument

To develop a self-report measurement for Addiction Prone Personality, items were collected to facilitate item generation after reviewing the literature and measurement tools available. The following scales were used to build the scale in this study: The Teen (Hemstreet 1993); Substance Abuse Rating Scale Transmissible Liability Index-College Version (TLI-CV)(Arria et al. Adolescent Substance Use Scale (Mateo et al. 2017); the Addiction Potential Scale (APS) and the Addiction Acknowledgement. Scale (AAS) (Weed et al 1992).

Then, items were selected, translated, and adapted to suit the Iraqi environment. The scale consists of 40 items in its preliminary form, and after modifying some items, the total number of items in its final form became (33). This scale was applied to the research sample in Iraqi universities. The response to each item of the scale was done according to a response scale of (1): never to (5): always. The items in favor of the variable were corrected according to a response scale of (1-5), while the items against the variable were corrected



according to a response scale of (5-1). The sequence of negative items within the scale is as follows: (4, 7, 37, 39, 40).

Exploratory Factor Analysis:

Exploratory factor analysis (EFA) for (APPS) scale was conducted in this study. Factor analysis aims to determine whether there is one or more clusters of items through which respondents perform similarly in a relative way. The number and elements of the clusters are also determined by the correlations between all pairs of tests (Croker and Algina, 2009, p. 382). This means that determining the number of common factors contributes to interpreting the pattern of correlations between different pairs of tests that assemble in a cluster of tests, and the common factor is a latent or unobserved variable that links the scores of two or more tests. Hence, the relationship between test scores and scores on the common factor is referred to as loading of the test with the particular common factor (Croker and Elgina, 2009, p. 406).

The value of the Kaiser-Meier-Olen test was (0.87), which is higher than the cut-off point (0.50). This indicates that the research sample size is appropriate for factor analysis. It has been shown from Table (2) and Figure (1) below that the result of the exploratory factor analysis of the Addiction Prone Personality Scale was revealed by one general factor, and this factor explains an amount of (19.98) of the total variance, with a latent root of (7.99). This Exploratory Factor Analysis was conducted to verify the face validity of the scale.



						scale					
Factor 11	Factor 10	Factor 9	Factor 8	Factor 7	Factor 6	Factor 5	Factor 4	Factor 3	Factor 2	Factor 1	
										0.43	1
				-0.35						0.45	2
					0.34			0.47		0.31	3
											4
								0.46	0.44	0.45	5
	0.304		0.35					-0.31		0.35	6
										0.32	7
									-0.31	0.50	8
	0.34									0.63	9
							0.31			0.45	10
				-0.34						0.49	11
			0.41							0.53	12
						-0.41				0.48	13
									-0.46	0.42	14
										0.41	15
									-0.39	0.57	16
										0.53	17
			-0.43							0.47	18
										0.54	19
		0.31								0.58	20
									-0.34	0.38	21
	-0.41	0.32	0.36								22
										0.59	23
										0.34	24
										0.53	25
									0.40	0.56	26
										0.49	27
									0.36	0.47	28
										0.59	29
						0.31					30
										0.57	31
										0.62	32
				-0.31						0.47	33
								-0.33		0.43	34
		0.31				-0.48				0.41	35
		0.32								0.54	36
						0.42	0.39			0.68	37
					-0.55					0.33	38
											39



						0.34				0.45	40
1.04	1.04	1.09	1.15	1.18	1.40	1.46	1.70	2.06	2.25	7.99	Agent values
2.59	2.61	2.73	2.86	2.96	3.50	3.66	4.26	5.14	5.61	19.98	% of variance

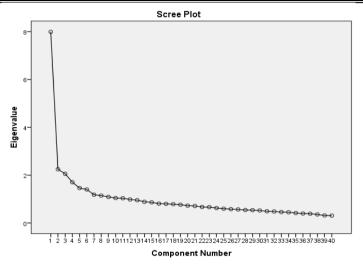


Figure (1)

The correlation of the item score to the total score of the scale (Item Validity)

After excluding the items (3, 4, 5, 6, 22, 30, and 39),the Pearson Correlation Coefficient was used to identify the correlation between the score of each item in the (APPS) and the total score of the scale. When the correlation values were compared with the value of the tabular Pearson Correlation Coefficient, which was (0.06) at the level (0.05) and degree of freedom (998), it became evident that the



correlations are all statistically significant, as demonstrated in table (3).

Table (3)
Correlation between item score to total score for scale (Item Validity)

Item	Correlatio n Coefficien t	Sig	Item	Correlatio n Coefficien t	Sig	Item	Correlatio n Coefficien	Sig
1	0.42		12	0.55		23	0.48	
2	0.44		13	0.52		24	0.60	
3	0.32		14	0.48		25	0.57	
4	0.49	Significant	15	0.55		26	0.62	
5	0.62	Significant	16	0.57	Sig	27	0.48	sig
6	0.45		17	0.36	Significant	28	0.45	significant
7	0.49		18	0.59	ant	29	0.42	ant
8	0.53		19	0.35		30	0.53	
9	0.50		20	0.53		31	0.23	
10	0.40		21	0.55		32	0.35	
11	0.41		22	0.37		33	0.30	

Reliability

The results of the EFA indicated that the Addiction Prone Personality Scale (PPS) is unidimensional. Cronbach's alpha was calculated based on the(33) items. Cronbach's Alpha Coefficient was $\alpha = .89$, which is adequate.

Study 2: Results

Participants

The sample for the research results included (400) students, (191) percentage (47.8) were males, and (209) percentage (52.3) were



females who answered the items of the scale electronically from several Iraqi universities. The students were 1st, 2nd, 3rd, and 4th year

Objective (1): Measuring the prevalence of addiction-prone personality among the research sample

To identify the prevalence of addiction-prone personality, a sample of 1000 male and female students was adopted. To achieve this, the T-score was adopted as a norm for judgment, as shown in table (4).

 $\label{thm:corresponding} Table~(4~)$ The T Scores and their corresponding raw scores for the research sample

Sample	arithmetic mean	Standard deviation	Levels	T score	Raw data	No. of individuals	Percentage
			High	60 or			
				more	101-135	176	17.60%
1000	81.67	18.77	Medium	Between (40-60)	63-100	656	65.60%
			Weak	40 and more	62-37	168	16.80%

It is evident from the results in Table (4) that the percentage of the students who have proneness to addiction was as follows:

- 1. High level: the percentage was (17.6%).
- 2. Low level: the percentage was (16.80%).

It can pointed out here that the T-score (60 or more) indicates a value that exceeds the general arithmetic mean of the sample by one standard deviation. As for the T-score, 40 or less indicates a value that is less than the average by one standard deviation (Allam, 2000, p. 242).



The results reveal that 17.6% of the sample exhibited a high level of addiction-prone personality, which is alarming given the socio-economic and psychological challenges faced by Iraqi youth. This percentage reflects the influence of factors such as poverty, family instability, and exposure to substance abuse within communities.

There is also a familial factor of addiction when one or both parents have a history of addiction that also reinforces the likelihood of their children being driven to addiction. Moreover, the unsettling political situation and the lack of oversight at the borders that open the door for illicit drugs to flood the streets increase the risk of addiction.

Objective 2: Measuring (APP) among research Sample:

To achieve this goal, the scale was applied to a sample of (400) students, and the relative importance index was used for the responses on each scale item. Also, the relative importance index was extracted to measure the indicators of proneness to addiction in the research sample, as Table (5) illustrates.

Table (5)
Measuring addiction prone-personality among research Sample using relative importance index

I.S	Items	Weighted mean	relative importance index RII	Important level IL	Ranks
1	يرى والدي وعائلتي أخطاء في تصرفاتي أكثر مما يجب My parents see way too many mistakes in my behavior	2.62	52.4	Moderate	14
2	أتظاهر بالمرض عندما أريد التهرب من مسؤولية ما I pretend to be sick when I want to avoid responsibilities	1.77	35.4	Low	29



3	لدي القدرة على الاستمرار في العمل الذي أكلف به حتى النهاية I have the ability to continue any task till I finish it	1.62	32.4	Low	31
4	عندما اغضب أحطم الأشياء او اضرب اي شخص أمامي When I'm angry I destroy things or hit anyone in front of me	1.98	39.6	Low	26
5	اقع في المشاكل لأني لا أفكر قبل ان أتصرف I get in trouble because I don't think before I act	2.64	52.8	Moderately	12
6	أجد صعوبة في المهمات التي أقوم بها I have difficulty in any task I'm set to do	2.97	59.4	Moderately	8
7	اصرف الأموال دون تفكير I spend money without thinking ahead	2.56	51.2	Moderate	17
8	ينفذ صبري عندما انتظر دوري في موقف ما I get impatient when I wait for my turn in any situation	3.16	63.2	High	6
9	لا أمانع من تجربة اي دواء في سبيل التخلص من الألم الألم I don't mind trying any drug to get rid of the pain	2.64	52.8	Moderate	13
10	تستهويني فكرة العبث بممتلكات الآخرين I like the idea of vandalizing other's properties	1.48	29.6	Low	32
11	properties اترك البيت عندما اتشاجر مع افراد عائلتي I leave the house when I argue with my family	2.01	40.2	Moderate	24
12	ألجأ للكذب للحصول على الشئ الذي أريده I resort to lying to get what I want أشعر أن تصرفاتي تسبب الإذى للمحيطين بي	1.71	34.2	Low	30
13	I feel that my actions hurt those around me	1.86	37.2	Low	28
14	انا شخص مندفع I'm an impulsive person	2.59	51.8	Moderate	16
15	انا عنيد وصعب الطباع I'm stubborn and difficult	3.04	60.8	High	7
16	اشعر بالغضب من الطريقة التي يعاملني بها الناس I get angry about the way people treat me	2.78	55.6	Moderate	9
17	تعرضت للإنذار بالفصل عدة مرات خلال مراحل الدراسة I was warned of expnlsion several times during my studies.	1.41	28.2	Low	33
18	ادخل في مشاجرات مع اغلب أفراد العائلة I get into arguments with my family	2.52	50.4	Moderately	20
19	أقناع الآخرين بالحقيقة يتطلب الكثير من النقاش	3.62	72.4	High	2



			ı	I	
	Convincing people about the truth				
	takes a lot arguments				
20	افعل أشياء قد تعرض صحتي للخطر	2.35	47	Moderate	21
	I do things that comprise my health				
21	أصعب الصراعات التي أخوضها هو الصراع مع				
	نفسي	3.57	71.4	High	3
	The hardest struggles are the ones	3.37			
	with my self				
22	أحب العزلة	3.46	69.2	High	5
	I like to stay alone	3.40	07.2	Iligii	3
	يتملكني الشعور بالقلق على أبسط الأمور		72.2	High	
23	I feel anxious about the simplest	3.61			2
	things				
2.4	things لا اشعر بالرضا عن نفسي	2 55	5 1	Moderate	19
24	I don't feel good about myself	2.55	51		
	اشعر بالعجز عن إيجاد مواقف تشعرني بالسعادة			Moderate	10
25	I feel helpless that I can't find	2.75	55		
	situations that make me happy				
	اشْعْرُ أنى غير قادر على التخلص من عاداتي				
•	السيئة			Moderate	15
26	I feel I'm unable to get rid of my bad	2.61	52.2		
	habits				
27	أرفض أنتقاد الاخرين لي لاي تصرف يبدر مني				
	I was warnrd of expulsion several	2.74	54.8	Moderate	11
	times during my studies				
	ألوم نفسي على المشاكل التي أقع فيها		- 0.0		
28	I blame myself for the problems	3.54	70.8	High	4
	ألجأ الى تكرار تناول أى دواء يشعرني بحالة من				
••	الأرتياح	A 4=	42.4	Moderately	22
29	I resort to drugs to make me feel	2.17	43.4		
	better أقوم ببعض التصرفات الغريبة لاستشعار ردود فعل				
	الاخرين		42.2	Moderate	13
30	I do strange things to feel the	2.11			
	reactions of people				
	لدي القدرة على الاعتراف بالخطأ الذي ارتكبه				
31	I'm able to admit when I do	2	40	Moderate	25
	something wrong	-	10	1,10001010	
	الماشى مع الأصدقاء عندما يفعلون شيء اعتقد انه				
	خطا من اجل ان لا ارفض من قبلهم				
32	I get along with friends when do	1.93	38.6	Low	27
32	something wrong to avoid being				
	rejected				
33	استطيع تمالك نفسي في المواقف التي تثير الانفعال				
	I can get it together in heated	2.56	51.2	Moderate	18
	situations	4.30	31.2	Moderate	10
	Total Mean relative importance	2.51	50.20	Modera	ta
	Total Mean relative importance	4.51	30.20	wiouera	ıc



From the table above, it is evident that the items (convincing people about the truth takes many arguments; I feel anxious about the simplest things; The hardest struggles are the ones with myself; I blame myself for the problems; I like to stay alone) all have taken the highest five ranks as far relative importance index is concerned. It is also evident that the level of addiction-prone personality is moderated according to the relative importance index, which is (50.20) and according to the standard followed, as shown in the table (6).

Table (6)

The relative importance index of the alternative five-point scale indicates the level of the addiction-prone personality of the sample.

the level of the addresson prone personanty of the sample.					
	RII	Importance level			
1	$0.80 \le RII \le 1$	Very High			
2	$0.60 \le RII \le 0.80$	High			
3	$0.40 \le RII \le 0.60$	Moderate			
4	$0.20 \le RII \le 0.40$	Low			
5	$0 \le RII \le 0.20$	Very low			

Objective 3: Recognizing statistically significant differences in (APP) according to gender variable:

To achieve this goal, the *t*-test was used for two independent samples to determine the differences in (APP) according to the gender variable, as illustrated in Table (7).

Table (7)
T-test for two independent samples according to gender variable

Sample	Gender	No.	Mean	Standard deviation	Т	Sig.
400	Male	191	82.74	20.50		
.00	Female	209	83.03	19.96	0.14	0.89

Table (7) indicates no statistically significant differences in addictionprone personality between males and females. This suggests that both genders share similar risk factors in the Iraqi context, such as peer



pressure, societal norms, and exposure to similar stressors in the university environment.

The results can be attributed to several factors: psychological, economic, and social— the wide social relations in our modern world, the vast technological advancement, and the nature of age group all contribute to the fact that both males and females are on the same path of the proneness to addiction. This is particularly evident when the circle of friends widens, and peer pressure becomes a factor that increases the proneness to addiction as well as the psychosocial pressures that intensify anxieties that also contribute to addiction.

It is noteworthy to mention here that males and females are not equally exposed to addiction— there are biological, psychological and social factors that impact the probability and intensity of addiction. However, this does not mean that one gender is immune to addiction.; rather, the precipitating factors of addiction are different between them. Females are often drawn to addiction for emotional reasons that involve facing stress and trauma, while males tend to use substances for pleasure, risk-taking or as an attempt to prove themselves.

DISCUSSION

The results of the statistical analysis of the research sample among university students indicate that the percentage of proneness to addiction among those with high-level addiction-prone personalities and those with low-level addiction-prone personalities shows a slight difference. This is due to circumstances that enhance the proneness to addiction, including social and economic factors such as poverty, unemployment, family problems, and other factors. Politics, culture, and irresponsible use of technology, especially



social media with no censorship, have also contributed as risk factors for addiction.

The results showed that there were no statistically significant differences as far as the gender variable is concerned. Hence, the statistical analysis results indicate that university students live in the same social and cultural environment, whether male or female, which reflects positively or negatively on their personalities, which is indicated by the results of the gender variable.

In this age group, individuals are affected by the above-mentioned biological, social and environmental factors as well as having personality traits that make them more addiction-prone compared to their peers. Those who are addiction-prone have cetain psychological and behavioral traits such as impulsivity, recklessness, lack of self-control, the inability to take calculated decisions, boredom, constantly seeking excitement, not having the necessary social support and feelings of isolation, suffering from anxiety or depression and some chronic health problems. Furemore, financial strain and challenges (poverty and lack of job opportunity) also play a role in increasing the the likelihood of addiction. In other words, when youth face a combination of the these factors, they are more likely to be prone to addiction.

CONCLUSIONS

Substance addiction remains a pressing global issue with severe repercussions on health, economies, and societies. In the Iraqi context, the findings of this study highlight the need for targeted interventions to address addiction-prone traits among university students. When addiction is not adequately understood, or when its treatment is undermined by social dynamics of isolation, exclusion, and marginalization, it creates confusion in addressing this problem properly.

In the context of young people's lives, many factors make them vulnerable to developing addictive behaviors, from their biology and genetic makeup to their age, environments, and the life they are born into. Through the interaction between individuals and their environment and the strategies they develop to understand how to deal with those behaviors if they encounter adversity, addiction becomes more likely to occur, although it is certainly not a foregone conclusion. There are genetic factors, cognitive ones (thoughts, beliefs, and expectations) as well as social factors (socioeconomic status, cultural norms, and people's perceptions), and the individual's perceptions become a hindrance if he/she decides to quit an addictive habit. Overall, both genders may be prone to addiction, but for different reasons; hence prevention and treatment programs need to take these differences into consideration to provide the necessary support for both genders.

To sum up, personality traits and the situations youth face are factors that cause them to be vulnerable to addiction, which makes youth search for quick solutions to avoid painful self-awareness, pursue satisfaction, comfort, and pleasure, and refuse to coexist or deal with stressful situations. This ultimately limits their freedom and ability to experience their true feelings and curbs experiences with others and enjoy life, which may contribute to setting youth on the path to self-destruction.

Another conclusion that this study came up with is the significance of the accurate diagnostic tools that enable those interested in proper assessment of addiction and developing prevention programs, which would work towards creating awareness of the dangers of addiction and reducing the risk factors for youth.

the findings of this study, it is recommended that In light of both The Ministry of Higher Education and Scientific Research and The Ministry of Health conduct awareness campaigns that include activities. workshops lectures raise posters. and to awareness preventive measures to avoid addiction to drugs and substances. In addition, further research can utilize the measurement tool developed in this research, and postgraduate candidates should consider further studies of addiction-prone personality among university students.



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