



The Personality Characteristics in Patient Stricken Anxiety Disorder

Hossein Kayedkhordeh^{1*}, Madine Amiri² and Hojat Papi³

¹ Department of General Psychology, Islamic Azad University, Dezful Branch, Dezful, Iran.

² Department of General Psychology, Islamic Azad University, Eghlid Branch, Eghlid, Iran.

³ Department of General Psychology, Islamic Azad University, Andimeshk Branch, Andimeshk, Iran.

*Corresponding author's e-mail: hoseinkayed@yahoo.com

ABSTRACT: The aim of present research was to compare the personality characteristics in patient stricken anxiety disorder and evidence group. In this present descriptive pattern, 200 (100 male and 100 female) citizens of Shiraz city participate in this research in winter and spring 90 and 91. In this research, statistical population of anxious persons were all of patient stricken anxiety disorder that referred to psychiatric polyclinic, and statistical population of common, was employee and students of university. All of participants completed NEO personality questionnaire and Beck's anxiety questionnaire. For data analysis, statistical tests including dependent t test, chi-square and discriminant analysis have been used. The results showed that there is significant relationship between personality characteristics of patient stricken anxiety disorder and control group ($p < 0.05$). Also the results of discrimination analysis test with step by step method showed that preventive variables could prevent the dependent variables and separate two groups with each other's by 94/5 percent rate success. The results showed that there is significant difference between personality characteristics of patient stricken anxiety disorder with control group. Therefore, attention to normal personality reinforcement to mental health care-givers is suggested.

Key words: Big Five Personality, Anxiety Disorders, Mental health

Received 10 Jan. 2014
Accepted 10 Mar. 2014

ORIGINAL ARTICLE

INTRODUCTION

Psychological Pressure, in the past few decades, has been a serious factor endangering the health of body and mind. To this end, researchers have been looking for effective ways to deal with stress and anxiety. Anxiety disorders are the most common psychiatric disorders in the general population. All people become anxious in their life. But chronic and severe anxiety is abnormal and problematic. Reviewing researches suggests that anxiety in women and low-income individuals and the elderly ones is more common. The anxiety is pervasive, inconvenient and obscure phobic that is along with automatic symptoms such as headaches, sweating, heart palpitations and feeling of tightness in the chest. Anxiety is necessary response to stress and prepare individual when facing with danger for action and reaction. In many cases, the response is vital and logical but the abnormal condition can affect a wide range of human performance [1]. Anxiety is process of interacting sub- systems, including physical, emotional and behavioral and changes in one subsystem led to a change in another subsystem.

Anxiety is a feeling of fear and unreasonable discomfort and is symptom of psychological disorders that is reduced by defensive behaviors such as running away from a bad situation or performing an action, in accordance with prescribed regulations. However, anxiety is the main symptom of common disorders which are classified as anxiety disorders. These disorders include generalized anxiety, panic disorder, phobia and thinking-practical obsession and posttraumatic stress disorder [2].

Anxious children often feel shame and guilt and they feel good only when they serve others. They avoid expressing their feelings, especially feelings of malice and aggression and to release their anger, do not have any way. This children's fantasy is filled with scenes of aggression and even Sadistic [3].

Thus, according to the role of anxiety in the incidence of mental disorders, individual's disability in achieving optimized performance and ability, and also seeing anxiety as a distinct disorder or group of anxiety disorders, many experts and researchers have investigated different aspects of anxiety.

Due to adverse impact of anxiety, particularly severe effects on performance and health level and its treatment problems, assessment of various aspects of personality is of utmost importance that in one hand it can be the underlying disorder, and on the other it can affect its course and prognosis. There is significant relationship between personality characteristics and the disorder [4]. Personality is a field that deals with the individual characteristics including emotional and behavioral that are usually stable and predictable and are avoidable in everyday life. Undoubtedly one of the terms of personality is the most controversial and most interesting concepts that exist in psychology. The English word personality is derived from the Latin word *Prsona* and originally referred to the mask of the Greek ancient Theatre Actors of drama and yet it included its role [5]. Growing up relative personality activity is function of fact expansion that is the most common vital problem of

people about their lives and relationships with others. According to Atkinson and Hilgard, the individual personality is certain pattern of thinking in ways that determines person compatibility with the environment. The personality is defined as unique and relatively stable pattern of thoughts, feelings and actions. The Big Five personality is introduced as exogenous variables studied in this research as follows: Neuroticism: Neuroticism is defined by a tendency to emotional instability. Neurotic individuals are identified with features such as anxiety, anger, hatred, depression, self-consciousness, impulsiveness. Extroversion: Extroversion is defined as having physical, verbal and collectivism activity and extroverted persons are identified with characteristics such as warmth, gregariousness, assertiveness and activity, excitement-seeking. Openness to experience: openness to experience is defined as rationality and openness to the new ideas and actions and is identified with features such as imagination, aesthetics, feelings, actions and values. Agreeed: Agreeableness is defined as a tendency to self-sacrifice, altruism and compassion, agreeable individuals are identified with features such as trust, openness, altruism, compliance, modesty and understanding others. Deontology: Deontology is defined as tendency to be discipline, accountability and efficiency. Dutiful subjects are identified with features such as competence, conscientiousness, striving for success, self-regulation and policy [6].

Personality may have important quality traits of Psychiatry such as passive or aggressive or words without pathological gestures such as ambition, religious or pal. A similar sequence of these qualities that make up the detection of psychiatric disorders such as anxiety disorders predicts some predictions on behavior of the person in specific situations and mental disorders that may be found in person [7].

In a research, Noorbala and Bagheri using public mental health test showed that 2.3 percent of Iranian people and 2.9 percent of Tehran people are anxious. This study shows that some personality traits are associated with rumination and emotional turmoil [8]. However, test anxiety does not have significant relationship with introspection and extroversion. Neurotic and anxious students experience more test anxiety. But relate their failure to internal factors such as inability and less potent.

Palahang [2] showed that personality traits such as negative neurosis and psychological irritation are predisposing factors for some disorders. Then awareness of mental disorders, raised hopes in therapists that we can reduce the incidence of mental disorders in adults by predicting in time.

Initial studies by Costa and McCrae [9] showed that happiness is associated with high extraversion and low neurosis. Major studies have confirmed this association [10].

Jorm [11] revealed that individuals, who were high in neuroticism, were more prone to depression and self-blame.

With regard to the descriptions and according to above results and considering each personality dimensions of Neo model and examining anxiety disorders in this study, we aim to compare a group of patients with anxiety disorders compared to normal subjects.

The statistical population: The statistical population was all patients with generalized anxiety disorder, depressive disorder and anxiety disorders that referred to Psychiatry and Psychotherapy private Centers of Shiraz Hospital in first six months of 2011 (Located in the medical building at Moshir intersection) and clinical diagnosis was based on psychiatrist view and based on diagnostic criteria DSM-IV-TR and medical record and Beck Anxiety Test, statistical population was normal people include all Shiraz citizens, they were matched based on demographic characteristics such as age, gender, educational level and marital status with groups having anxiety disorders.

Sample size and sampling method: The sample for this study consisted of 200 subjects from whom 100 people were selected as anxiety disorder group who referred to Counseling and Psychotherapy centers for by available sampling (subjects were 50 female and 50 male with diploma education or higher and 24 subjects were diagnosed with depression and anxiety disorders and 76 patients were diagnosed with anxiety disorder) and 100 normal subjects were randomly selected as Shiraz citizens who were matched with anxiety disorder group. This match was in terms of demographic characteristics including age, education, marital status and gender.

MATERIALS AND METHODS

1-NEO Personality Inventory (short form): The NEO-FFI Personality Inventory known as NEO is designed by Costa and McCrae [12] and has been used translated by HagShenas [6]. 60-item questionnaire has been designed for short and fast assessment of big five Personality (emotional instability, extraversion, openness to experience, agreeability) and each factor is composed of 12 statements. Each item of questionnaire is composed of likert 5 scales. (Totally disagree=0, disagree=1, no opinion=2, agree=3, totally agree=4). In this questionnaire, options 1, 8, 9, 12, 14, 15, 16, 18, 23, 24, 27, 29, 30, 31, 33, 38, 39, 42, 44, 45, 46, 48, 54, 55, 57, 59 are graded inversely.

Reliability and validity: On the validity of NEO questionnaire, the results of several studies suggest that NEO-FFI scales have good internal consistency. For example, Costa and McCrae [13] have reported Cronbach's alpha coefficient between 0.68 (for agreeability) and 0.86 (for neurosis). The validity of this questionnaire is obtained using test- retest method on 208 students in 3 months intervals of 0.83, 0.75, 0.80, 0.79 and 0.79 respectively for factor C, A, O, E, and N.

On concurrent validity of the questionnaire and morphological markers questionnaire of Myers Briggs, Minnesota multi aspect personality questionnaire, California revised questionnaire, studying habits of Guilford and Zuckerman, scale list, interpersonal scale, and high relationship has been reported.

Reports are provided on the validity of NEO-FFI factors. Costa and McCrae stated that NEO short tools with full form of NEO-PI has exact match such that short form scales have higher correlation than 0.68 with the complete form scales. In addition, in this study it has been reported that this questionnaire has explained 85% of variance in convergent validity that is obtained by evaluation of same trait using features and wife and peer evaluations.

2- Beck Anxiety Inventory: Beck Anxiety Inventory is a self-report questionnaire that has been developed to measure anxiety in adolescents and adults. This questionnaire is a 21 items scale that subject selects in each item one of the options. Four options of each item is in a four section range from 0 to 3. Each test item, describes one symptoms of anxiety (mental, physical, panic). Thus, the total score of the questionnaire range from 0 to 63.

Reliability and validity: studies show that this questionnaire has high reliability and validity. Its internal consistency coefficient (alpha coefficient) is 0.92, its validity is 0.75 during one week by retest method and its correlation is variable from 0.30 to 0.76 range. Five types of content validity, concurrent, structural and functional have been measured for this test that all of them demonstrate the effectiveness of this tool in measuring anxiety [10].

In Iran, some researches have been conducted on the psychometric properties of this test. For example: Ghoraee, has reported the reliability coefficient as 0.80 with retest method and two weeks interval. Also Kaviyani and Mousavi [8] in examining the psychometric properties of this test in the Iranian population have reported validity coefficient of 0.72 and reliability coefficient of test – retest as 0.83 with one month interval and Cronbach's alpha coefficient as 0.92.

RESULTS

Emotional instability: According to absolute value of calculated t (-2.08) that is greater than critical t of table (1.98) in error level of 0.05 and degrees of freedom 99 (also $p=0.040<0.05$), investigation hypothesis is approved assuming a 95% probability.

Therefore, it is assumed that there is significant difference between the mean of emotional instability in both normal and anxiety groups. Mean comparison shows that mean of emotional instability in anxious group is more than normal group.

Extraversion: According to absolute value of calculated t (4.28) that is greater than critical t of table (2.63) in error level of 0.01 and degrees of freedom 99 (also $p=0.040<0.01$), investigation hypothesis is approved assuming a 99% probability.

Therefore, it is assumed that there is significant difference between the mean of extraversion in both normal and anxiety groups. Mean comparison shows that mean of extraversion in normal group is more than anxious group.

Openness to experiences: According to absolute value of calculated t (6.63) that is greater than critical t of table (2.63) in error level of 0.01 and degrees of freedom 99 (also $p=0.040<0.01$), investigation hypothesis is approved assuming a 99% probability.

Therefore, it is assumed that there is significant difference between the mean of openness to experiences in both normal and anxiety groups. Mean comparison shows that mean of openness to experiences in normal group is more than anxious group.

Agreeability: According to absolute value of calculated t (9.25) that is greater than critical t of table (2.63) in error level of 0.01 and degrees of freedom 99 (also $p=0.040<0.01$), investigation hypothesis is approved assuming a 99% probability.

Therefore, it is assumed that there is significant difference between the mean of agreeability in both normal and anxiety groups. Mean comparison shows that mean of agreeability in normal group is more than anxious group.

Conscientiousness: According to absolute value of calculated t (9.92) that is greater than critical t of table (2.63) in error level of 0.01 and degrees of freedom 99 (also $p=0.040<0.01$), investigation hypothesis is approved assuming a 99% probability.

Therefore, it is assumed that there is significant difference between the mean of conscientiousness in both normal and anxiety groups. Mean comparison shows that mean of conscientiousness in normal group is more than anxious group.

The above results show that there is a significant difference between the personality traits of anxiety disorder patients and normal subjects and hypothesis is confirmed.

Table1. Summary of descriptive statistics for studied variables

Variable	Component Group	Normal		Anxiety		Total	
		Mean	SD	Mean	SD	Mean	SD
Personality	Instability Anxiety	1.78	0.597	1.92	0.352	1.855	0.479
	Extraversion	2.30	0.540	2.01	0.359	2.15	0.480
	Openness to experiences	2.35	0.468	1.96	0.359	2.16	0.459
	Agreeability	2.65	0.489	2.03	0.478	2.34	0.572
	Conscionable	2.82	0.517	2.17	0.382	2.50	0.561
Anxiety	7.33	4.399	26.97	4.646	17.15	10.830

The table 1 summarizes the descriptive statistics for the variables of personality, anxiety and their components. To test this hypothesis, given that personality characteristics are spatial variables and comparison of two groups (groups of anxious and normal) is considered, T-test is used. According to the fact that two groups are matched, T-test is used and T is correlated.

Table 2. T-test for comparison of personality traits between two anxious and normal groups

Variable	Index Group	N	Mean	SD	Standard error	Mean difference	T Value	DF	Sig.
Instability	Normal	100	1.78	0.567	0.057	-0.14	-2.08	99	0.040
	Anxiety	100	1.92	0.352	0.035				
Extraversion	Normal	100	2.30	0.540	0.054	0.29	4.28	99	0.001
	Anxiety	100	2.01	0.359	0.036				
Openness to experiences	Normal	100	2.35	0.468	0.047	0.39	6.63	99	0.001
	Anxiety	100	1.96	0.359	0.036				
Agreeability	Normal	100	2.65	0.489	0.049	0.61	9.25	99	0.001
	Anxiety	100	2.03	0.478	0.048				
Conscionable	Normal	100	2.82	0.517	0.052	0.66	9.92	99	0.001
	Anxiety	100	2.17	0.382	0.038				

DISCUSSION

To compare characteristics of patients with anxiety disorders and normal individuals dependent t-test was used (Table 2). The findings of study showed that there is significant difference between emotional instability, extroversion, openness to experience, conscientiousness and agreeability between anxious patients and normal subjects. These findings are consistent with Palahang [2] and Jorm [11] findings. Theoretically open mind individuals are curious people and their life is full of experience, Hagshenas [4]. These people want to enjoy new hypotheses and unconventional values and have more positive and negative feelings compared with others. They are sensitive to their feelings and can understand others' feelings. Therefore, they have greater confidence and not only express their emotions more comfortable, but also desire interpersonal relations. Neuroticism is along with negative emotions such as fear, sadness, irritation, anger, guilt and feels confused, vulnerability to unpleasant situations. These features are effective in individual's consistency with environment. They show less consistency with others and stressful conditions. It is more likely to be damaged from life events. Anxious people are often anxious and prone to worry and feelings sadness and loneliness and the feeling of being excluded cause they distressed and withdraw when dealing. A consistent person is philanthropist, is sympathy of others and eager to help them, and believes that others have the same relationship with him. In comparison inconsistent one is self-centered and suspects others' intention and tends competition than cooperation and due to this feature he is rational. Agreed persons are more favorable than non- agreed ones. It seems that this index tends to social and mental health's positive aspects. Extroverted people are social, active, decisive and dialogue oriented and like excitement and stimulation. They enjoy help others social situations and social interactions, they have a good level of energy and remain optimist. These people are very warm and have friendly behavior with others. In terms of loyalty, they are serious in reaching goals, they need great success. They have specific goals and are serious and determined to achieve them. They exhibit organized and continuous behaviors. They have accepted effective, rational and understandable decision-making. It seems that these features direct people towards positive aspects of life and mental health. They cope effectively with the stresses of everyday life, and less likely to be damaged by live events.

As we know, most tendencies to experience negative emotions such as fear, sadness, anger, guilt and hate constitute the realm of neuroticism. Fragile emotions of this group hinder their adaptation and provide a framework that makes people prone to irrational beliefs. For this reason it is less possible to control their impulse.

Anxiety is a very important structure in the area of psychology and even health-related areas (such as medical, health behavior, health psychology). Researchers have found that anxiety itself, does not determine its implications, but in one hand, it depends on coping with stressful factors and on the other hand, depends on the characteristics of the individual nature (Such as personality and physical factors).

As personal biases play an important role in emergence and maintenance of emotional and behavioral disorders, so examining this field, in addition to identify cognitive and emotional abnormalities of personality, it can suggest strategies for interpreting and modifying and it can prevent mental disorders such as anxiety disorders.

REFERENCES

1. Kennerly, H. 1995. Managing anxiety a training manual. (2nd.Ed). Oxford medical publications.
2. Palahang, H.2011. Performance evaluation of the personality six-factor test in screening personality disorder and anxiety in students. University Journal. Medical University of Shahrekord. Volume 13, No. 2.

3. Cal, G. & Joe, R. 1994. Gender and test anxiety styles are GPA psychological, PP. 512- 514.
4. Hagshenas, H. 1999. Normalization of Neo personality test, revised form. *Journal of Thought and Behavior*, fourth year, No. 2
5. Zare, N., Pir khaefi, A. & Mobini, D. 2010. Studying the effectiveness of problem-solving skills for promoting engineers' creativity according to their personality type. *Journal of news on industrial/ organizational psychology*, 1(31): 51-58.
6. Hagshenas, H. 2006. Big five personality. (Manual of interpretation and test norms NEO-PI-R, (NEO-FFI)). Shiraz: Shiraz Medical Sciences University.
7. Shamlu, S. 1991. *Psychopathology*, Tehran, Roshd Publication.
8. Kaviyani, H. & Mousavi, A.S. 2008. Psychometric properties Anxiety Inventory of Beck BAI in age and gender classes of Iran population. *Medical Faculty Journal*.
9. Costa, P.T., Jr. McCrae, R. R. 1990. Personality disorders and the five – factor model of personality. *Journal of personality Disorders*. 4(4): 362-371.
10. Beck, AT, Steer R.A. 1990. editors. *Beck Anxiety Inventory Manual*. San Antonio, TX: Psychological Corporation.
11. Jorm, A.F. 1987. Sex differences in neuroticism: A quantitative synthesis of published research. *Australian and New Zealand Journal of psychiatry*. 21-501.
12. Costa, P.T., Jr. McCrae, R.R. & Holland. 1984. Personality and Vocational interest in an adult sample. *Journal of applied psychology*. 69:390-400.
13. Costa, P.T, J. McCrae, R. R. 1992. *Professional Manual. NEOPI-R and NEO- FFI psychological Assessment Resources*, Inc.