RELATIONSHIP BETWEEN DISTRESS TOLERANCE AND LIFE STRESSORS AMONG DRUG ADDICTS

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A Research Thesis submitted to the

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In partial fulfillment of the requirements for the degree of

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February, 2023

CERTIFICATE OF APPROVAL

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It is certified that the Research Thesis titled "Relationship between Distress Tolerance and Life Stressors among Drug Addicts" carried out by Saroosh Rashid, Reg. No. BSP191004, under the supervision of Dr. Sabahat Haqqani, Capital University of Science & Technology, Islamabad, is fully adequate, in scope and in quality, as a Research Thesis for the degree of BS Psychology.

Supervisor:
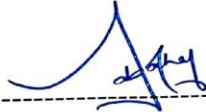
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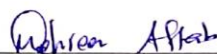
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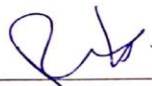_____

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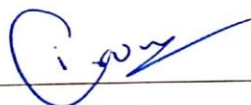Ms. Irum Noureen

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DEDICATION

Praise to Allah Almighty for his blessings on me. I would like to dedicate it to my parent's word of support and encouragement has helped me succeed. I would like to dedicate my thesis to my family and my teachers for always supporting and motivating me. They sacrificed what they had in order to provide me with the best. This day is surely a result of their hardships and struggles.

DECLARATION

DECLARATION

It is declared that this is an original piece of my own work, except where otherwise acknowledged in text and references. This work has not been submitted in any form for another degree or diploma at any university or other institution for tertiary education and shall not be submitted by me in future for obtaining any degree from this or any other University or Institution.

Saroosh Rashid

BSP191004

February, 2023

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First and foremost, praise to Allah Almighty, upon whom we ultimately rely for guidance and nourishment. Secondly, I would like to I want to acknowledge and sincerely thank my supervisor Ms. Irum Noureen for facilitate me to complete this research. Whose comments can helped me out to improve my research it is not just her careful supervision but also her personal care and affection that has given me confidence to proceed smoothly with my work. Words can only be inadequate express my gratitude to my supervisor for patiently helping me to thin clearly. I would forever be grateful. I am honored and blessed to be one of your students. I am also grateful for my friends for supporting me assisting me and being a source of inspiration throughout this process. Thanks for my sister and my parents for helping and supporting me. My gratitude for everything they have done for me is beyond words.

Abstract

The aim of this study was to find out the relationship between Distress Tolerance and Life Stressors among Drug Addicts. The occurrence of both positive and negative circumstances in a person's life that significantly alter daily routines were known as life stressors (Parsaei, 2020). The ability of a person to resist or tolerate suffering and circumstances that cause distress is known as distress tolerance, and it is a notion in emotion regulation (Leyro et al., 2010). Drug Addiction is increasing day by day in schools, colleges and everywhere. This study was conducted on a sample of 200 drug addicts with a correlational study design. The distress tolerance scale and brief daily stressors screening tool was used. Data was collected by using Distress Tolerance Scale (DTS) and Brief Daily Stressor Screening Tool (BDSST). Data analysis was done by using SPSS. Correlation was used to explore relationship among variables. T-test and Anova was used to analyze demographic variables. The results showed a strong and significant negative relationship between distress tolerance (its subscales) and life stressors (p= -.230**). It also discussed to reduce the availability of drugs.

*Keywords***:** Distress tolerance, Life Stressor, Drug addicts

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List of Acronyms/Abbreviations

T   Tolerance

A   Appraisal

A   Absorption

R   Regulation

Chapter-1 Introduction

Drug Addiction is increasing day by day in schools, colleges and everywhere. Drug addiction is considered a chronic condition and is one of the most serious issues that exist today. A common disorder includes drug use and alcoholism, among others. Drug users may anticipate or believe that using drugs will lead to the following benefits such as the development of pleasant emotions (relaxation), greater social interactions (lower inhibition), escapism, changing one's psychological state to a more desirable one, bodily changes, or the avoidance of withdrawal symptoms in drug users who are dependent on the substance. Many people who can use the drugs due to life stressors such as work load, financial problems, death of loved one etc. It also depend on person tolerance level to manage the stressful situation. (Kubala, 2022)

Stressful experiences in life are described as being generally separate that are perceived as being dangerous to someone's well-being or exceed their resources (Lazarus, 1991, 1993; Lazarus & Folkman, 1984). This definition states that separate life experiences include separation from a spouse, having an extramarital affair, losing your job, not getting paid, and other interpersonal or family related situations. The occurrence of both positive and negative circumstances in a person's life that significantly alter daily routines were known as life stressors (Parsaei, 2020). Life stressors include things like losing a loved one, failing in work, getting divorced, and going through other stressful situations. Life stress and mental and physical health are closely correlated (Cohen et al., 2007; Slavish et al., 2010).

There are many reasons why people experience life stressors, including experiencing considerable change, a strong sense of stress and not having much or any control over how

anything will turn out, experience discrimination, hatred, or abuse, having responsibilities, running into financial difficulties, interacting with people negatively etc. (Felman, 2020)

The ability to resist unpleasant experiencing states is referred to as distress tolerance. The ability to tolerate unpleasant physical or mental conditions, or distress tolerance (DT) is the perception of this ability or its actual existence (Zvolensky, et al., 2010; Simons & Gaher, 2005). According to the study, Distress tolerance is the ability to endure unpleasant circumstances like physical discomfort, uncertainty, ambiguity, aggravation, and negative emotions (Zvolensky et al., 2010).

The ability of a person to resist or tolerate suffering and circumstances that cause distress is known as distress tolerance, and it is a notion in emotion regulation (Leyro et al., 2010). A major exposure for traumatic stress and several types of psychopathology, such as substance abuse, mood, and anxiety disorders is distress tolerance (DT) (Zvolensky, Leyro, Bernstein, & Vujanovic, 2011). Emotional Distress Tolerance (EDT) is a term used by Zvolensky and Leyro (2010) to describe one's perceived capacity to be exposed to and withstand unpleasant emotional situations. It is a normal to feel anxious when faced with a new challenging. The ability to control an emotional event without becoming overstimulated is referred to as distress tolerance (Linehan, 2014). This study was carried out during the severe COVID-19 outbreak. Distress tolerance (DT), which has been connected to a wide range of psychiatric signs and conditions, including post-traumatic stress disorder.

Literature Review

Distress Tolerance and Life Stressors

Over 29 million people experience substance use disorders (SUDs) globally (UNODC, 2017). These disorders provide a challenge for Arab Nations, which have seen an increase in illicit drug use during the past 20 years (Sweileh, etal. 2014). Life substance use disorders have been linked with negative life events such as (Loss of someone, failure on the job etc)

Negative life events like parent death, parental conflict and divorce, limited parental support, physical and emotional abuse and neglect, social isolation and deviant affiliation have been linked to an increased likelihood of substance dependence (Harlow, 2008).

Life stressors have a variety of effects on people and occasionally they can result in the worst situation (Ali, 1995). Learning to manage stress in life is not easy. It takes diligent awareness of the stressors in your life and work on acquiring coping mechanisms (Olmstead, 2006). The management of stress vary from person to person depending upon his or her distress tolerance as life stressors lead us to the state of depression and anxiety that gives a chance to become drug addicts but the capability of person to tolerate and manage that stressor helps us to get rid of depression and anxiety and eventually help us to stay away from the state of being drug addicted. Individuals with low distress tolerance are predicted to account distress as unbearable and that they are incapable of handling being happy or upset (Simons, 2005).

Stress has a significant part in the processes leading to addiction, according to several of the main theories of addiction. These range from psychological models of addiction, which see drug abuse and use as a coping mechanism to deal with stress, to self-medicate, to lessen tension, and to lessen withdrawal-related distress (Tomkins, 1966).

According to several research, adults who have had a lot of recent, bad life experiences use and abuse drugs at higher rates (Harlow, 2008). In psychopathology, especially in the context of substance use, the trait-like disposition for tolerating difficult or unpleasant emotional states is known as distress tolerance (e.g. smoking cessation, alcohol and cannabis use). High rates of cannabis and alcohol use as well as difficulties quitting smoking have been linked to lower discomfort tolerance. Given these findings, some researchers have started to focus on distress tolerance as a potential mechanism for treating substance use disorders. (Allen, 2021)

Infact, some have asserted that certain latent categories, such distress tolerance, play a wider role than previously thought. In most part of literature on anxiety, distress tolerance has also been researched. Distress intolerance or a greater inability to withstand physical or mental discomfort, is typically linked to more severe anxiety symptoms. For instance, because of their general low tolerance or inability to bear upsetting bodily sensations, people with panic disorder may avoid particular circumstances. Distress tolerance or the general inability to handle uncomfortable or negative emotional states, may be at the root of a number of illnesses, including those of the digestive system or causing anxiety unique to the stomach (Nelson, 2020).

Although a variety of gastrointestinal illnesses have been linked to anxiety and other psychological factors as worsening symptoms and may be contributing to malfunction, a direct connection between distress tolerance and specific anxiety has not yet been proven. The capacity to successfully resist unpleasant internal events, such as unpleasant emotions, painful memories, and intrusive thoughts, is known as distress tolerance (DT). Several health issues such as obesity, worry, and substance abuse, are strongly connected with low distress tolerance (Beck et al., 2013, Brown et al., 2005).

According to this conceptualization, high distress tolerance encourage good emotion regulation actions (such as problem solving and affect labelling), whereas low distress tolerance results in less effective emotion-regulation efforts such as behavioral repulsion and suppression (Jeffries et al., 2016; Leyro et al., 2010). Distress tolerance association with positive health outcomes may be explained by its relationship with effective-emotion regulation strategies (Aldao et al., 2010, Jamieson et al., 2012). Differentiation in emotion control between people indicate being vulnerable to a range of health problems, including complaints about mental health.

Distress tolerance research has concentrated on larger emotion dysregulation indicators. It assesses groups of related emotional regulation difficulties such as difficulties choosing or accessing a stress reduction technique (Gratz & Roemer, 2004). A number of these nearby constructs, including distress tolerance have relationships with outcomes related to emotion control.

According to recent studies, stressors from the environment and other people can cause substance use to relapse (Correia, Carey, & Borsari, 2002). It is still challenging to come to firm conclusions on the usage of these characteristics to predict relapse due to the high amount of variability among study participants, treatment mode, and outcome measurement (el-Guebaly, Hodgins, & Armstrong, 1999).

Numerous researchers have discovered a connection between one's capacity to bear distress and the length of time abstaining from cigarette smoking, even though this association has not been applied to drug and alcohol usage. First, Brown and Lejuez (2002) compared smokers who had at least one sustained stop effort lasting three months or more versus smokers who had at

least one sustained quit attempt but had failed to sustain any prior quit attempt for more than 24 hours.

The ability of a person to withstand stressful circumstances and persevere in accomplishing goal-oriented tasks while under distress is a variable construct called distress tolerance (McHugh et al., 2011). In general, there are two parts of distress tolerance. The first is an internal factor, or the person's perception of their capacity to endure unpleasant feelings and other undesirable states, such physical discomfort (Leyro et al., 2010). The second is an element that is external and concentrate on how the person really behaves in reaction to those feelings or states (Leyro et al., 2010).

When considered as a "trait", those with higher distress tolerance are more likely to be able to process and approach unpleasant emotions and other states, whereas those with lower distress tolerance are more likely to fear unpleasant emotions and respond maladaptive by trying to avoid or escape unpleasant emotions and other states (Leyro et al., 2010).

Previous research have shown that lower levels of distress tolerance are linked with anxiety, depression, eating disorders, substance addiction and anti-social behavior (Leyro et al., 2010). Numerous research have looked at how differently distress tolerance correlates with various disorders including anxiety and depression. Life stressors are closely related with poor mental and physical health (Cohen et al., 2007; Slavish et al., 2010). Researches was found that men and women respond to distress tolerance in various ways. It has been discovered that males are more tolerant of suffering than women are since earlier studies did not reveal that men who are less tolerant of distress having more externalizing symptoms than women do (Daughters et al., 2009; Daughters, Gorka, Magidson, Mac Pherson and Seitz Brown, 2013).

Theoretical Framework

The transactional theory of stress and coping was developed by Richard Lazarus (1966) which presents stress as a result of an interaction between a person's complex environments and there several structure, including their cognitive, physiological, affective, psychological, and neurological ones. The primary appraisal determines if the stressor is dangerous. To confront a perceived threat, a person's resources or response options are evaluated in secondary appraisal. Reappraisal of both the nature of the stressor and the resources available to accommodate it are ongoing processes that are now in progress. Different life stressors have been linked with person distress tolerance. This theory suggests that how the person responds or cope up to the different situation in which he or she faces different life stressors. Coping skills or capabilities are basically related to the distress tolerance of a person. Persons having more distress tolerance have more capability to cope up different life challenges or life stressors.

| Stressor | → | Secondary Appraisal | → | Coping Response |
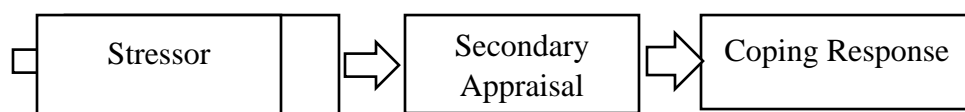
Transactional theory of Stress and Coping

Rationale

The purpose of this study was to investigate the relationship between Distress Tolerance and Life Stressors among Drug Addicts. The occurrence of both positive and negative circumstances in a person's life that significantly alter daily routines were known as life stressors (Parsaei, 2020). Distress tolerance is the person's ability to tolerate the stressors of life. The capacity for goal-directed action to be continued while adverse emotional states are present is known as

distress tolerance (Serody, 2010). Every individual have faced a lot of stress it based on person's ability. These stressors vary from person to person. As it depends upon different situations a person face. Many people have use drugs due to life stressor such as loss of someone, divorce, family conflicts etc. In the previous studies limited research have looked at the connection between distress tolerance and life stressors. Now, a study has been conducted on drug addicts in order to explore that how the life stressors affect the distress tolerance of drug addicts.

Objective

1. To explore the relationship between distress tolerance and life stressors among drug addicts.

2. To understand the role of demographic variables (gender) among distress tolerance and life stressors among drug addicts.

Hypothesis

1. There would be a negative relationship between distress tolerance and life stressors among drug addicts.

2. There would be a significant gender differences in distress tolerance and life stressors among drug addicts.

Chapter-2 Methodology

Research Design

Correlational study design was used.

Population and Sample

The sample was collected from drug addicts and the participants were 200. The sample was selected through the non-probability techniques and the process was a purposive sampling technique. Data was collected from males and females both with age group above 18 (Leyro et al., 2010).

Sampling Technique

In this study, purposive sampling was used.

Inclusion Criteria

Participants who were willing to be a part of the study were chosen.

Participants were chosen from Islamabad and Rawalpindi rehab centers.

Both males and females were included.

Exclusion Criteria

Persons have any mental illness were excluded.

Instruments

Distress Tolerance Scale

This scale was developed by Simons and Gaher (2005).It is consisting of 15 items to find out the level of distress tolerance. Participants were asked to respond to each item using 5 points

(1. Strongly agree, 2. Mildly agree, 3. Agree and Disagree equally, 4. Mildly disagree 5. Strongly disagree). The Internal consistency was 0.89.

Brief Daily Stressors Screening Tool

This scale was developed by Saskia Scholten. It is consisting of 10 items to find out the level of daily life stressor. Participants were asked to respond to each item using 5 points Likert scale (**0.** Not at all, 1, 2, 3, 4. Very much). The internal consistency was 0.78.

Scale Translation

Forward Translation

The questionnaire was first translated concerning the WHO criteria, and the scale was given to 4 people who know English and Urdu (bilingual).

Expert Panel

Then after the translation of scale in Urdu the penal of four experts were called for the assessment of the Urdu translated version. They concentrate on linguistic and cultural factors the best translation has been chosen from those four translated scales. The most accurate translation of the items was then sent for the back translation.

Backward Translation

The back translation was intended to evaluate the conceptual clarity between the Urdu and English versions. It clarifies all the doubts regarding the translated scale for that back translation held by the people who have a better understanding of both languages Urdu and English.

Reviewed Penal

At last, both the original and the translated scales were reviewed and evaluated by the panel members. They make the translation concise, clear, and easy to understand for the general population.

Ethical Consideration

The research is approved by the Capital University of Science and Technology. The consent forms were given to the participants prior to research. The participants were ensured with confidentiality and also had the choice to leave the research if the participants are not comfortable. The participants were also informed about the method of the study and how they had to fill the questionnaire and scales. The participants were also be informed about their confidentiality and their rights.

Procedure

Purposive sampling was done to recruit participants from different rehabilitation centers of Islamabad and Rawalpindi. Sample was composed of both males and females from age above 18 years. Institutional approval was taken from CUST. Data collection was used only for research purpose. Demographic and consent forms were given to all participants and their personal information was kept confidential and was used only for research purposes. They were allowed to leave the study whenever they feel like. Then they were given both scales.

Analysis

SPSS was used for quantitative analysis. For distribution of data, descriptive statistics was used. Frequency and percentages were calculated for mean, median, mode, standard deviation,

skewness, and kurtosis were computed for continuous variables. The reliabilities of the scales were calculated through SPSS i.e., distress tolerance scale (DTS) and Brief Daily Stressors Screening Tool (BDSST) were used to check the relationship between two variables by using a t-test, a bivariate correlation to see the relationship between distress tolerance and life stressors, a t-test to see the comparison and it was also use the ANOVA.

Pilot Study

The sample for the pilot study was 50 male and female participants from Islamabad and Rawalpindi rehab centers. Permission was taken before from the rehab centers to collect the data.

Objective

To determine the psychometric properties of the translated scale.

Table 1

Psychometric properties for translated scales

Variables	Items	M	SD	α	Range		Skewness	Kurtosis
					Potential	Actual		
DTS	15	55.3	10.3	.78	15-75	35-70	-.79	-.68
DTS_T	3	11.8	3.6	.78	3-15	4-15	-1.0	-.25
DTS_A	6	21.6	4.2	.46	6-30	11-26	-.54	-.41
DTS_A	3	11.5	2.8	.44	3-15	5-15	-.83	-.28
DTS_R	3	11.5	3.0	.55	3-15	3-15	-1.0	1.1
BDSST	10	19.3	8.5	.79	0-40	3-33	-.41	-.95

Note: DTS = Distress Tolerance Scale, T = Tolerance, A = Appraisal, A = Absorption, R = Regulation, BDSST = Brief Daily Stressors Screening Tool

Alpha reliability, mean, standard deviation and range are displayed in table 1. The Distress Tolerance Scale have good internal consistency (α = .78). The subscales of distress tolerance scales that are tolerance, appraisal, absorption and regulation were .78, .46, .44 and .55 respectively. The distress tolerance subscales having α values of tolerance have normal internal consistency reliability, appraisal have lower internal consistency, absorption have moderate internal consistency reliability and regulation have also severe internal consistency reliability. The Brief Daily Stressors Screening Tool have also acceptable range (α = .79). The scales and subscales shows that data have normally distributed.

Table 2

Correlation for translated Scales

Variables	1	2	3	4	5	6
1. DTS	-	.91**	.89**	.62**	.64**	.35*
2. DTS_T		-	.76**	.49**	.50**	.38**
3. DTS_A			-	.44**	.42**	.16
4. DTS_A				-	.16	.30*
5. DTS_R					-	.29*
6. BDSST						-

Note: DTS = Distress Tolerance Scale, T = Tolerance, A = Appraisal, A = Absorption, R = Regulation

As shown in table 2 Pearson correlation were used to analyze the relationship between distress tolerance and life stressors. This table shows that the positive relationship between distress tolerance and life stressors. There is a positive correlation between scales and their subscales.

The pilot study aims to investigate the relationship between the study's variables and the psychometric qualities of the measures. Since the intended participants for the scales were drug addicts above the age of 18 years who cannot understand English, as Urdu translation was done initially. To determine the scale's internal consistency, the alpha reliability of both instruments was assessed. The scale overall item correlation was calculated. It was decided that both of the study's variables were ineffective because all items show a positive association with the variables. Both scales showed acceptable ranges on the base of the main study.

Chapter-3 Results

The aim of the study was to find the relationship between distress tolerance and life stressors among drug addicts. The sample of this study was 200. The demographic variables among the targeted sample were gender, education, marital status, family structure, employment. To explore relationship among constructs, multiple statistics were applied by using SPSS. The internal consistency of the used scale was determined by Cronbach's alpha reliability coefficient. Pearson Correlations were calculated to determine the relationship between the variable of the current study. Independent sample *t*-test was computed for demographics of gender, to explore the difference between male and female drug addicts. One-way-ANOVA was used to explore differences.

Table 3

Frequency (f) and Percentage (%) of demographic variables (N = 200)

Variable	f	%
Gender		
Male	185	92.5
Female	15	7.5
Education		
Matric	79	39.5
FA	69	34.5
BS	37	18.5
Any Other	15	7.5
Family		
Joint	110	55.0
Nuclear	90	45.0
Status		
Married	113	53.5
Unmarried	86	43.0
Divorced	1	.5
Employment		
Yes	150	75.0
No	50	25.0

Note: f = frequency, % = percentage

Table (3) exhibits the demographic variables and their frequency and percentage. These variables includes age of drug addict person, gender, education, family structure, marital status and employment. Table also shows joint family (f = 110, % = 55.0) has higher frequency than nuclear family (f = 90, % = 45.0). It also shows that married person (f = 113, % = 53.5) has higher frequency than

unmarried ($f = 86$, % = 43.0) and divorced ($f = 1$, % =.5). It also shows that those individuals who

are respond on yes of employment it has higher frequency (75.0) than those who are respond no

on employment (25.0). Table also shows that those person who have done with Matric ($f = 79$, %

= 39.5) has higher frequency than FA ($f = 69$, % = 34.5), BS ($f = 37$, % = 18.5) and any other ($f =$

15, % = 7.5). Table shows that males ($f = 185$, % = 92.5) has higher frequency than females ($f =$

15, % = 7.5)

Table 4

Descriptive statistics and alpha reliability of study variables (N = 200)

Measure	Items	α	*M*	*SD*	Range		Skew	Kurt
					Potential	Actual		
DTS	15	.74	52.5	9.8	15-75	15-74	.70	.56
DTS_T	3	.68	7.0	3.3	3-15	3-15	.63	-.45
DTS_AP	6	.52	14.9	4.6	6-30	6-30	.51	.49
DTS_AB	3	.17	6.9	2.5	3-15	3-14	.54	-.24
DTS_R	3	.46	7.0	2.9	3-15	3-15	.53	-.17
BDSST	10	.79	15.8	9.0	0-40	0-37	.17	-.69

Note: M = mean, SD = standard deviation, α = Alpha reliability, Skew = skewness, Kurt = kurtosis, DTS = Distress Tolerance Scale, BDSST = Brief Daily Stressor Screening Tool.

Table (4) shows that item numbers, alpha reliability, mean and standard deviation,

skewness, kurtosis of all the scales used in the present study. DTS (α = .74,) these scale are

reliable according to Simon and Gaher criteria. BDSST (α = .79) these scale are also reliable and

which also indicates the mean and standard deviation of the measures DTS (*M* = 52.5, *SD* =

9.87), BDSST (*M* = 15.8, *SD* = 9.06). It shows that the data have normally distributed.

Table 5

Pearson correlation between scales and subscales of) sample (N = 200)

Variable	1	2	3	4	5	6
DTS	-	.80	.85**	.75**	.71**	-.23**
DTS_T		-	.59**	.54**	.41**	-.15*
DTS_AP			-	.49**	.46**	-.21**
DTS_AB				-	.48**	-.07
DTS_R					-	-.25**
BDSST						-

**Correlation is significant at the 0.01 level (2-tailed).

*Correlation is significant at the 0.05 level (2-tailed).

Note: DTS = Distress Tolerance Scale, BDSST = Brief Daily Stressors Screening Tool

Table 5 exhibits Pearson correlation analysis was used to analyze the relationship between distress tolerance and life stressors as the data were normally distributed. The results showed a strong and significant negative relationship between distress tolerance (its subscales) and life stressors (p= -.230**).

Table 6

Gender differences in life stressors and distress tolerance and its subscales

Variable	Males (*n* = 185)		Female (*n* = 15)		t (198)	p	Cohen's d
	M	*SD*	*M*	*SD*			
DTS	52.9	9.7	47.2	9.8	-2.4	.01	.58
DTS_T	6.8	3.2	9.0	3.6	-2.4	.01	.64
DTS_AP	14.7	4.5	17.4	4.6	-2.1	.03	.59
DTS_ Ab	6.8	2.5	8.6	2.5	-2.7	.00	.72
DTS_R	7.0	3.0	7.4	2.9	-.53	.59	.13
BDSST	15.7	8.9	17.3	10.2	-.66	.50	-.18

Note: Distress Tolerance Scale, Brief Daily Stressor Screening Tool, M = Mean, SD = Standard Deviation

Table 6 explain the difference of mean scores for male and female on both scales. It also shows mean, standard deviation, p value and effect size across the gender i.e., male and female. Result indicates that the significant difference p<.05 on distress tolerance scale and the other result indicates that the significant difference p = .5 on brief daily stressors screening tool.

Table 7

Mean difference of marital status in life stressors and distress tolerance

Variable	Married		Unmarried		Divorced		F	p	η^2
	M	*SD*	*M*	*SD*	*M*	*SD*			
DTS	53.8	10.2	50.9	9.1	40.0	-	3.0	.04	.03
BDSST	16.9	9.4	14.2	8.4	20.0	-	2.2	.10	.02

Note: DTS = Distress Tolerance Scale, BDSST = Brief Daily Stressor Screening Tool, M = Mean, SD = Standard Deviation

Table 7 shows mean, standard deviation, p value and effect size across the gender i.e., male and female. Results indicates that the significant mean difference with $p < .04$ on distress tolerance scale and the other result indicates that the non-significant mean difference p >.10.

Table 8

One-way Anova for education

Variable	Matric		FA		BS		Any other		F	p	η^2
	M	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*			
DTS	52.8	9.6	54.3	8.9	51.6	10.6	45.0	10.1	3.9	.00	.05
BDSST	16.5	9.5	16.6	8.1	15.0	9.5	10.0	7.8	2.5	.06	.03

Note: DTS = Distress Tolerance Scale, BDSST = Brief Daily Stressor Screening Tool, M = Mean, SD = Standard Deviation

Table 8 shows mean, standard deviation, F value and effect size of distress tolerance scale and brief daily stressor screening tool across the education i.e., Matric, FA, BS, any other. Results indicated F (3, 196) = 3.97, p >.05 whereas the value of η^2 is .05 which shows large effect size.

Chapter 4- Discussion

In this research we explored the relationship between distress tolerance and life stressors among drug addicts. Drug addiction is increasing day by day in every place such as schools, university etc. Present study has been conducted on drug addicts in order to explore that how the life stressors affect the distress tolerance of drug addicts.

The sample of present study was 200 drug addicts (Males, $n = 185$; Females, $n = 15$). Two scales were used to measure distress tolerance and life stressors. The correlation study design was used. The data was analyzed through the "Statistical Package for the Social Sciences" and was to check the relationship between two variables by using a t-test, a bivariate correlation to see the relationship between distress tolerance and life stressors, differences among gender was sought by using t-test and were also use the ANOVA for multiple comparisons of level of education.

The questionnaires used in this study include a demographic sheet, a distress tolerance scale and brief daily stressors screening tool. According to the scales, author; Cronbach's alpha reliability of the distress tolerance scale was found to be .92 which is considered good reliability. In this research study, Cronbach's alpha of the translated Urdu version of this scale is 0.78. According to the scales author; Cronbach's alpha reliability of the brief daily stressors screening tool was found to be .78 which is considered good reliability. In this research study, Cronbach's alpha of the translated Urdu version of this scale is 0.79.

It was hypothesized that there would be a negative relationship between distress tolerance and life stressors. It appears that the hypothesis has been supported by the results of a Pearson correlation analysis, which showed a strong and significant negative relationship between the two variables, distress tolerance and life stressors. This means that if the life stressors increases, the

distress tolerance of person also decreases. This is supported by the findings of the previous research, which has also observed that life stressors have negative impact on drug user distress tolerance (Felton et al., 2018).

To check the second hypothesis of the study, the t-test were used to exhibit the gender differences in life stressors and distress tolerance and its subscales. Our hypothesis indicates that there would be significant gender differences between life stressors and distress tolerance and its subscales (Simon & Gaher, 2005).

Conclusion

According to recent research life stressors was associated with lower distress tolerance among both men and women and it was associated with both positive and negative effects. However, people use drugs which can cause anxiety and depression problems and it had a negative impact on their distress tolerance. The present study aimed to find out the relationship between distress tolerance and life stressors among drug addicts.

All the hypothesis in the present study has been accepted by the current data as it had been concluded that there is a significant negative relationship between distress tolerance and life stressors.

Limitations

The sample size of female is less due to social desirability. This research has been conducted only on the drug addicts living in twin cities (Rawalpindi/ Islamabad). Thus, our findings may not be generalizable to all the drug addicts living in different areas. Thus, a research can be conducted on educated drug addicts in future.

Future Implication

      This study would be useful to know the relationship between distress tolerance and life stressors among drug addicts. This study will be helpful for the people suffering from a lot of problems to improve their distress tolerance. The study will be useful for the campaigning against drug addiction and will also help people to become aware of their problems and solutions by learning distress tolerance skills in order to enhance distress tolerance. Through different campaigns and public awareness related to drugs it can help out to reduce the availability of drugs.

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APPENDICES

Appendix A

Support Letter

C.U.S.T.

Capital University of Science & Technology

Islamabad

Islamabad Expressway, Kahuta Road,
Zone - V, Islamabad, Pakistan
Telephone   : +92-51-111-555-666
              : +92-51-4486700
Fax   : +92-51-4486705
Email   : info@cust.edu.pk
Website   : www.cust.edu.pk

Ref. CUST/IBD/PSY/Thesis-221
October 21, 2022

TO WHOM IT MAY CONCERN

Capital University of Science and Technology (CUST) is a federally chartered university. The university is authorized by the Federal Government to award degrees at Bachelor's, Master's and Doctorate level for a wide variety of programs.

Ms. Saroosh Rashid, registration number **BSP191004** is a bona fide student in BS Psychology program at this University from Spring 2019 till date. In partial fulfillment of the degree, she is conducting research on "Relationship between distress tolerance and life stressors among drug addicts". She is required to collect data from your institute.

Your cooperation is highly appreciated. Please feel free to contact undersigned, if you have any query in this regard.

Best Wishes,

Dr. Sabahat Haqqani
Head, Department of Psychology
Ph no. 111-555-666 Ext: 178
sabahat.haqqani@cust.edu.pk

Appendix B: Information sheet

(معلوماتی کاغذ)

السلام علیکم! میرا نام سروش رشید ہے۔ میں کیپیٹل یونیورسٹی آف سائنس اینڈ ٹیکنالوجی میں بی ایس سائیکلوجی کی طالب علم ہوں۔ میں منشیات کے عادی افراد کے درمیان تکلیف برداشت اور زندگی کے تناؤ کے درمیان تعلق پر تحقیق کر رہی ہوں۔ اس مقصد کے لیے مجھے آپ کا وقت اور مدد درکار ہوگی۔ میں آپ کو کچھ سوالنامے دوں گی جنہیں آپ کو بھرنا ہوگا۔ ان سوالناموں کو بھرنے میں 15 منٹ لگیں گے۔ میں آپ کو یقین دلاتی ہوں کہ   آپ جو بھی معلومات دیں گے، وہ ہمارے درمیان ہی رہے گی۔ اور آپ کا ڈیٹا ایک محفوظ کمپیوٹر میں رکھا جائے گا ۔تحقیق مکمل ہونے کے کچھ عرصے بعد اس ڈیٹا کو ڈلیٹ کر دیا جائے گا۔ آپ کا نام یا دیگر شناختی معلومات کہیں بھی استعمال نہیں کی جائیں گی۔ آپ کے پاس اس تحقیق کے بارے میں مزید کوئی سوالات ہیں، تو آپ ابھی مجھ سے پوچھ سکتی / سکتے ہیں۔ اگر بعد میں بھی آپ کو کوئی سوالات ہوں، تو آپ نیچے دیے گئے ای ۔میل پر مجھ سے رابطہ کر سکتی /سکتے ہیں۔

Appendix C

رضامندی فارم

(میں نے اوپر دی گئی معلومات کو اچھی طرح پڑھ لیا ہے (یا مجھے پڑھ کر سنا دیا گیا ہے)۔ میں ہدایت کے مطابق مطالعہ کے طریقہ کار پر عمل کرنے سے اتفاق کرتی/کرتا ہوں۔ میں سمجھتی/سمجھتا ہوں کہ دستخط شدہ رضامندی کے فارم اور ڈیٹا کو رازداری میں رکھا جائے گا۔

شرکت کنندہ کے دستخط _____

تاریخ _____

sarooshrashidrana@gmail.com

Appendix D: Demographic Sheet

(ذاتی معلومات کا فارم)

	عمر
مرد / عورت	جنس
میٹرک/ ایف اے/ بی ایس	نظام تعلیم
مشترکہ/ انفرادی	خاندامی نظام
شادی شدہ/ غیر شادی شدہ	اژواجی حیثیت
ہاں / نہیں	روزگار ہے

Appendix E: Brief Daily Stressors Screening Tool

روزمرہ مسائل کا سوالنامہ

ہدایات: روزمرہ زندگی میں چھوٹے بڑے مسائل کا سامنا کرنا پڑتا ہے۔ جو مسلسل پیش آتے رہتے ہیں۔ جس کا کوئی عادی نہیں ہو پاتا۔ جو کم زیادہ یا کم ہو سکتے ہیں ۔ برائے مہربانی نشان لگائیں کہ کتنی مضبوطی سے ان پریشانیوں اور تکالیف سے آپ اثر انداز ہوئے ہیں پچھلے بارہ مہینوں سے۔

بہت زیادہ				بالکل بھی نہیں	مجھے ان کا سامنا ہوتا ہے	
4	3	2	1	0	سماجی ذمے داریوں کی مشکلات (مثلا جماعتیں، تنظیمیں)۔	**1.**
4	3	2	1	0	گھریلو ذمہ داریوں سے جڑی مشکلات: (جیسے کہ گھریلو کام کاج، دیکھ بال، بچوں کی پرورش یا والدین کی ذمہ داریاں، اسکول کی ذمہ داری)۔	**2.**
4	3	2	1	0	صحت کے مسائل (مثلا بیماریاں، دائمی بیماریاں)۔	3.
4	3	2	1	0	مالی رکاوٹیں (مثلا جیسے کہ کم آمدنی، قسطیں)۔	4.
4	3	2	1	0	تعلیم/ پیسے سے عدم اطمینان (مثلا امتحانات، حد سے زیادہ کام)۔	5.
4	3	2	1	0	ثانوی روزگارکی مشکلات (سکول اور کالج کے ساتھ مطابقت، زیادہ ذمے داری، شور کی آلودگی)۔	6.
4	3	2	1	0	رہائشی صورتحال سے عدم اطمینان (مثلا شور، گھر کا چھوٹا ہونا)۔	7.
4	3	2	1	0	متفرق تصادات، تنازعات، تناؤ: قریبی افراد کے ساتھ (خاندان والے، گھریلو معاملات، دوست، ساتھی، وغیرہ)۔	8.

4	3	2	1	0	دوسرے افراد (ہم پیشہ، ہم جماعت، شاگرد، پڑوسی، کرائےدار، مالک مکان)۔	9-
4	3	2	1	0	کوئی اور بوجھ یا پریشانی جس کا ابھی تک ذکر نہیں کیا گیا۔	10-

Appendix E: Distress Tolerance Scale

اذیت کی پیمائش

ہدایات: اس وقت کے بارے میں سوچیں جس میں آپ نے اذیت یا بےچینی محسوس کی۔ فہرست میں سے اس بیان کو چن

لیں جو کہ بہتر انداز میں اذیت یا بےچینی کی احساس کے بارے میں آپ کی سوچ کے بارے میں بیان کرے۔

1۔ پرزورمتفق

2۔ تھوڑا سا متفق

3۔ متفق اور غیرمتفق برابر

4. تھوڑا سا غیر متفق

5. پرزور غیرمتفق

پرزورغیر متفق	تھوڑا سا غیر متفق	متفق اور غیرمتفق	تھوڑا سا متفق	پرزور متفق	بیانات
					1. اذیت یا بےچینی محسوس کرنا میرے لیے نا قابل برداشت ہے۔
					2. جب میں اذیت یا بےچینی محسوس کرتا/کرتی ہوں، وہ تمام جو میں سوچ سکتا/سکتی ہوں، وہ یہ کہ میں کتنا برا محسوس کرتا/کرتی ہوں۔
					3. میں اذیت یا بےچینی کی احساس کو قابو نہیں کر سکتا/سکتی۔
					4. میری اذیت کی احساسات اتنی شدید ہیں کہ انہوں نے مکمل طور پر قابو کیا ہے۔
					5. اذیت یا بےچینی محسوس کرنے سے زیادہ کوئی بھی بدتر نہیں ہے۔
					6. میں اذیت یا بےچینی کو دوسرے لوگوں کی طرح برداشت کر سکتا/سکتی ہوں۔
					7. میری اذیت یا بےچین رہنے کے احساسات قبول نہیں۔
					8. میں اذیت یا بےچینی سے بچنے کے لیے کچھ بھی کروں گا/کروں گی۔

					9. دوسرے لوگ میری نسبت اذیت یا بےچینی کی احساسات کو بہتر برداشت کرنے کے قابل دکھائی دیتے ہیں۔
					10۔ اذیت میں یا بےچین رہنا میرے لئے ہمیشہ ایک بڑی مصیبت رہی ہے۔
					11۔ جب اذیت یا بےچینی محسوس کرتا/کرتی ہوں تو میں اپنے آپ سے شرمندہ ہوتا/ہوتی ہوں۔
					12۔ میری اذیت میں یا بےچین رہنے کی احساسات مجھے ڈرا دیتی ہیں۔
					13۔ اذیت میں یا بےچینی کی احساسات کو کے لئے میں کچھ بھی کروں گا/گی۔
					14۔ جب میں اذیت یا بےچینی محسوس کرتا/کرتی ہوں تو مجھے فورا اس کے لئے کچھ کرنا چاہئے۔
					15۔ جب میں اذیت یا بےچینی محسوس کرتا/کرتی ہوں، میں کچھ نہیں کر سکتا/سکتی لیکن میں اس میں توجہ دیتا ہوں کہ اذیت دراصل کتنی بری محسوس ہوتی ہے۔

Appendix F

Permission from the Author of the scales

Distress Tolerance Scale Inbox ☆

Saroosh Rashid 21/10/2022
to jeffrey.simons@usd.edu ⌄
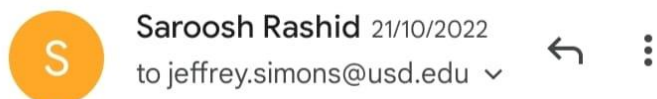
Dear Sir,

 I hope this email finds you well.

This is Saroosh Rashid, a student of BS Psychology.

I am doing my research work (Thesis) on drug addicts in which I'm measuring "Relationship between Distress Tolerance and Life Stressors among Drug Addicts".

Pertaining to this, I required a Distress Tolerance Scale in the English Version.

Therefore, I request you to grant me permission to use your scale on the Distress Tolerance English version Questionnaire in my research.

I would also appreciate it if you provide me with the respective scale/questionnaire in English version in pdf format.

I will be grateful to you and appreciate your assistance in this regard.

Anxiously waiting for your positive response.

 Thanks with kind Regards,
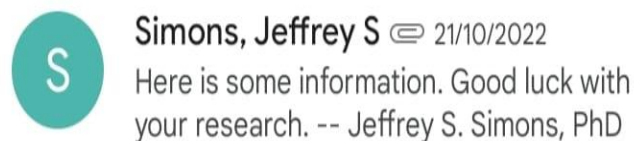
Simons, Jeffrey S 🖉 21/10/2022
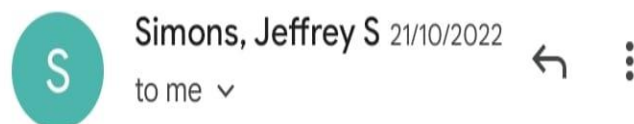Here is some information. Good luck with your research. -- Jeffrey S. Simons, PhD
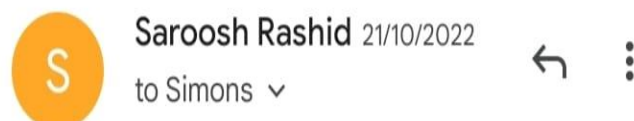
Saroosh Rashid 21/10/2022
to Simons ⌄

Thank you so much sir for your positive response. Can you please also allow me to translate your scale in Urdu Language as well?

Show quoted text

Simons, Jeffrey S 21/10/2022
to me ⌄

Sure, I attached an urdu version if it helps. I don't have information about its validity though.

Brief Daily Stressor Screening Tool (BDSST) Inbox ☆

Saroosh Rashid 12/10/2022

Dear Sir, I hope this email finds you well. This is Saroosh Rashid, a student of BS

Dr. Saskia Schol... 13/10/2022
to me ∨

Dear Saroosh Rashid,

please use the BDSST for your personal research. You find the English version here: https://www.kli.psy.ruhr-uni-bochum.de/dips-interv/klipsy/bdsst/download-de.html

Best regards

Saskia Scholten

Screening Tool Inbox

Saroosh Rashid 24/10/2022
to Saskia ∨

Thank you so much sir for your positive response.Can you please also allow me to translate your scale in Urdu Language as well?

Dr. Saskia Scho... 24/10/2022
to me ∨

Yes, you may translate the tool to Urdu. Please provide a reference link
once you finished the translation and study. We would like to link your
research, especially the translation, to our homepage.

Best regards Saskia Scholten

report