

Personal Drug use Among Drug Users: A Structural Equation Model

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Abstract:- This research aimed to identify the best fit model for personal drug use. Specifically, the relationship among state self-esteem, emotional intelligence, and aggression of the drug users in Region XII. This study used the quantitative method of analysis and the structural equation model. The data were obtained from the 400 drug users in area of region XII under community based rehabilitation program. Four sets of sample questionnaires were used during data collection. The results showed that the level of drug users in region XII in terms of state self-esteem was described very high and emotional intelligence was also described high. It was also revealed that aggression among drug users was moderate and same for personal drug use. There were significant relationships between state self-esteem and personal drug use and also showed that the correlation among emotional intelligence and personal drug use had been important. Conclusively, there was a significant relationship between state self-esteem, emotional intelligence, aggression, and personal drug use. Moreover, state self-esteem, emotional intelligence and aggression are predictor of personal drug use. Furthermore, generated model 4 fits on personal drug use. This means that the causes of personal drug use lean on the emotional intelligence and aggression which stimulated by young and adult users. In addition, personal drug use is best anchored of state self-esteem and emotional intelligence which signify that the extent of state self-esteem and emotional intelligence could mean high level factor or contributor of personal drug use.

Keywords:- Personal Drug Use Among Drug Users: A Structural Equation Model, Region XII Philippines.

I. INTRODUCTION

In recent years, there has been growing awareness about drug use and the United Nations Drugs and Crime Office (UNODC) estimates that 2.3 percent of the world populace is abusing illegal drugs (UNODC, 2015). The Philippine Drug Enforcement Agency (PDEA) further announced that 92 percent of barangays was influenced by illegal drug use in the National Capital Region (PDEA, 2015) newly elected Filipino President Rodrigo Roa Duterte proclaimed a “war “on illegal drugs on July 2016 dubbed as Operation Double Barrel or Oplan Tokhang Program included efforts to curb and slash supply of illegal drugs. Minimization of supplies involved closing down drug manufacturing facilities and prosecuting substance

manufacturers. Supply mitigation activities involved society officials and/or local police going to the homes of recognized users and requesting them to relinquish willingly and seek treatment. As of March 2017 with an additional 44,070 arrests and 2,206 deaths, 1.18 million illegal drug consumers had surrendered (Raymundo, 2017).

The United Nations Office on Drugs and Crime (UNODC), 2000 which stated that drug abuse is intensified by complex political-economic challenges such as joblessness, crime and poverty in particular. There are many households and neighbourhoods devastated by these societal problems. Illegal drugs from around the world are entering Africa right now. Drug dealers trick adolescent people into getting drugs so that they can pressure their peers into taking drugs after they have been addicted (UNODC, United Nation on Drugs and Crime,2008).This adolescent people seem to think that drug exploration is an appropriate part of process of growing up. None expect negative impact of substance abuse seriously (Madu & Matia, 2003). There will be different studies on personal drug use that relate various factors to each other. However, personal drug use relation to state self-esteem found that adults struggling with drug abuse had lower self- esteem rates than individuals that had no drug abuse problems (Gupta and Sharma 2016). Those linkages are verified by other studies. The parent-adolescent relationship’s emotions of nearness are connected to the parents’ perceptions of their upbringing as satisfactory to them and to the youth’s self-esteem and involvement in the family activities.

Another study that linked personal drug use on emotional intelligence. This theory of emotional intelligence does not simply focus on differences in emotional experiences but rather takes into account factors such as how an individual deals with emotions once they are active (Paulson, Hill,& Holmbeck, 1991). On the other hand, personal drug use may link with aggression. Drugs have been linked to aggression either been used to ameliorate uncomfortable emotional states or have been implicated in the precipitation of aggression. Not only do many of mood altering substances impair perception but also there is proof that drug use through their ability to alter neurotransmitter levels alters mood state (Nuckols, 2018).

This study on personal drug use is significant because this would help to assess the current conditions of drug users in Region XII. As noted, it is necessary to understand that personal drug use is extremely powerful in the family environment that resolving a dysfunctional relationship gap

as a first steps in pushing beloved one towards substance abuse treatment. This kind of constructive family engagement can however help lead the rest of your family on a process of self-discovery and rehabilitation (Gifford, 2016).

With the immense complexities every problem presents, various studies worldwide were aimed at identifying factors that influence drug abuse, drawing conclusions and providing recommendations because of the numerous demographics, therapies, and study designs, it was hard to draw any clear conclusion and generalization from the research. This problem, with the continuing call for more research bodies, has developed a main stage stance on its significant impact and effect among drug users on personal drug use. Meanwhile, there is no research study covering all these listed variables in the Philippines specifically in the area of region XII. This research aimed to contribute a piece evidence to an increasing body of research and to design a new concept which aims to give a new path to the recovery of drug users' recovery.

➤ *Research Objectives*

The aimed of this investigation was to develop a best fit model for personal drug use through state self- esteem, emotional intelligence and aggression as factors. specifically, this study dealt with the following goals in mind: To ascertain the level of state self-esteem among drug users in terms of: performance self-esteem, social self-esteem, and appearance self-esteem. To assess the level of emotional intelligence among drug users in terms of: emotional awareness, emotional regulation, self- motivation, social awareness, social skills, and receptivity. To determine the level of aggression among drug users in terms of: physical aggression, verbal aggression, anger and hostility. To describe the level of personal drug use among drug users in terms of: recognition, ambivalence, and taking steps. To determine the significant relationships between: state self-esteem and personal drug use, emotional intelligence and personal drug use, and aggression and personal drug use. To determine the single and combine influence of independent variables on personal drug use among drug users. To determine what model best fits for personal drug use among drug users.

➤ *Hypothesis*

The following hypothesis was tested at 0.05 level of significance there is no significant relationship between: state self-esteem and personal drug use, emotional intelligence and personal drug use, and aggression and personal drug use. There is no variable that can best predict on personal drug use among users in Region XII. There is no model that best fits on personal drug use among drug users in Region XII.

II. LITERATURE REVIEW

This section presented different views from related studies pertaining to the dependent variable personal drug use which consist recognition, ambivalence and taking steps (Mowbray & Quinn, 2016). On the other hand, the dependent variable state self-esteem has three indicators as identified by Harris & Orth (2019) namely: performance self-esteem, social self-esteem and appearance self-esteem. The independent variable emotional intelligence has six indicators namely: self –awareness, emotional regulation, self-motivation, social awareness, social skills, receptivity (Metha & Singh, 2013). Another independent variable is aggression in which according to Aragon, Margaret, Dyer, and Bargh (2015) has four indicators namely; physical aggression, verbal aggression, anger and hostility.

➤ *State Self-Esteem and Personal Drug Use*

As stated by Rodewalt and Tragakis (2003), self-esteem as the proportion of achievement to failure in aspects of life are essential to a particular person, or the ratio of “success (to) desires” (James) of people. Self –esteem has historically been connected to concepts about self and body-well, conduct and the treatment of negative thinking, inner emotions of incompleteness, nothing less, self- doubt and body hatred.

In a further study by Patock-Peckham and Morgan-Lopez (2007) on maternal styles, it lead to a feeling the over protective fatherhood. Overprotecting during adulthood indicated that parents did not have confidence in their child's ability to make independent decisions. Male children with fathers communicating this lack of trust had lower self-esteem levels, which also had a powerful influence on drug use related issues.

The observations support the assertions of conventional and contemporaneous theories about the impact of social relations on self-esteem and the implications of self-esteem on the relationship framework. In total, the results indicate that the connection among people's social affairs and their level of self-esteem is absolutely mutual at all phases of development throughout the life, projecting a virtuous cycle between certain paradigms. So many studies have proven that personal drug use is influence by a wide spectrum of factors attributed to internal and external factors of the person.

The results confirm the conclusions of traditional and current theory about the effect of social relations on self-esteem and the effects of self-esteem on the partnership of domains (Harris & Orth, 2019).

Further, in the United Nations Drug Control Programme's World Drug (UNDCP, 2000), Pakistan is one of the severely affected countries in the world by drug abuse. At current situation there are about 3.5 million various kinds of drug addict rising at an annual rate of 7%. A review of social and demographic factors reported that 71.5 percent of drug abusers were less than 35 years of age with the largest number in the 20-30 age groups.

Likewise, study is also anchored on the pronouncement of Maslow's hierarchy of human motivation needs theory based on five stages whereby motivation develops, implying that lower-level needs must be met in order to meet higher needs. The needs described in this theory that can contribute to self-esteem and co-dependence are love belonging and the need for appreciation. The above theory posits that a person must satisfy his or her need to connect and enjoy love before he or she can effectively fulfil this next level of needs that he or she esteem. A co-dependent personality may attempt to meet their esteem needs with relationships that would normally satisfy the need for love / belonging (Bacon, McKay, Reynolds, & McIntyre, 2018).

Also the current study explores the potential that the state's self-esteem uncertainty will mitigate the association with benevolent and harmful forms of envy that described self-esteem Vrabel, Hill & Southard (2017). Erickson's believed that people affect each other's self-esteem and social relationships. However, the empirical proof was contradictory, causing significant doubt as to whether relationships are an essential step in the developing self-esteem.

Attachment theory emphasizes the importance of a mother-to-child connection. Bowlby's attachment research suggest that the first connection which suggest the first connection developed in childhood acts as a blueprint for all future social encounters and interactions, thus a person is at risk of failing to establish and maintain healthy connections later in life if early connections is disrupted, if this theory is extended to the concept of co-dependent behaviors, it is possible that co-dependence can evolve from disruption to early connection (McLeod, 2017).

Psychodynamic viewpoints, however, place humiliation at the core of the causes of violence, along with coping and social difficulties resulting from fragmented connections. Despite the lack of an emphasis on self-esteem in aggression and violence models and therapies, there is some recent research evidence suggesting a complex link between the two, but generally supporting a correlation between low self-esteem and abuse (Ifeanacho & Schanz, 2017).

In contrast to therapeutic measures, there are also things people can do by themselves to improve their self-esteem. One of these mechanisms is mediation. You can add another value to the list of mediation. Nonetheless, another study says that one cannot only develop self-esteem through mediation, but also obtain some other significant benefits. When we meditate, we develop our capacity to let go and to keep in view our thought and emotions. One strives to perceive clearly rather than participate actively in every little encounter that pops into our heads. In other words one why loose on hold on oneself (Puddicombe, 2015).

Abraham Maslow promotion of human needs, popularly known in humanity as Maslow's hierarchy of human need. Onah states that in 1943 the professor of psychology at the

Brandeis University, Abraham Maslow showed up with his hierarchy of needs theory as a highly respected researcher in the study of human needs and motivation with a proposition that individuals be motivated by five levels of needs namely: (1) Physiological needs, (2) safety needs, (3) belonging needs, (4) esteem needs and (5) self-actualization needs.

That level of self-esteem coupled with different needs and efforts to keep or improve self-esteem is an essential point to consider for a thorough understanding of the process underlying behavioural patterns than contextual self-esteem involving seeking compensation from moral support and appreciation. Latest studies have found these traits and habits to distinguishing patterns of coping with social challenges and varying health outcomes (Johnson, 2016).

➤ *Emotional Intelligence and Personal Drug Use*

A series of standards was studied extensively in 2016 to direct the theorization of EI and situated among wide and varied intellects. Among the design, I is labelled a hot wide and varied intellects. "Cool intelligence corresponds to ambiguous information, whereas hot intelligence has something to do with issues that are highly powerful and effective, they let our heart melt or chilled out hearts" (Mayer, Salovey, & Caruso, 2008). Findings have shown gender differences on both forms of EI measures capability and personality. Nikoopour and Esfandiari (20017) observed a remarkable difference in EI feature Instructor in English as a Foreign Language (EFL) in Iran but their intellectual social and cultural knowledge did not differ substantially. Spanish adulthood revealed that the overall EI score and results in the four EI divisions were influenced by gender, where EI skills were greater females than in males (Pinto, Extremera, & Fernandez- Berrocal, 2016).

More research focusing on collective emotional intelligence at the level of work groups, organizations, families and societies would help open further avenues for beneficial application relating to emotional intelligence as examples of possible societal and policy implications of emotional intelligence is provided by (Mikolajezak & Van Belleghem, 2017). Through assessing associations between participants emotional intelligence and their health care expenditures, they found that 1% increase in interpersonal emotional intelligence correspond to a 1% decrease in health care costs. Coupled with findings regarding the feasibility of increasing emotional intelligence through training, this finding suggest that societal programs aimed at increasing emotional intelligence might have economic benefit as well as enhancing personal wellbeing.

The utility of high emotional intelligence in various realms of life endeavours might be further explored for example, examined the role of emotional intelligence outcomes and found that higher emotional intelligence was associated with greater dyadic gains, benefitting negotiations partners (Schelegel, Mehu, Van Peer, & Scherer, 2018).

More loving and less controlled parents teach their children to have emotional expressivity, thus; perform a significant role in their offspring's emotional maturity (Poor, & Valizade, 2015). In effect, high emotional intelligence leads to higher control of stress and how levels of mood disorders. It is therefore necessary for nurses and nursing educators to grasp the idea of emotional intelligence, so that clients can receive balanced treatment. In addition, the integration of emotional intelligence concepts in pre-nursing education could provide refreshed viewpoints into hiring, preservation and eventually, patient/client results. Educational institutions can intellectually, socially and emotionally support all learners so that the graduate students can be better equipped to deal for success. Thus, whereas previous earlier research showed that EI was closely connected to the dimension of cognition, more recently it was observed that even the most similar character attribute to EI was permissible. The very poor association and socio-emotional types are fairly discrete and separate emotional intelligence was substantially related in various directions to all three types of emotional work (Mayer, Salovey, & Caruso, 2008).

In addition, surfaces' behaving was significantly correlated with the burnout of coaches and was weakly correlated with job satisfaction. Coach burnout was negatively associated with intense acting and authentic voice and positively associated with job satisfaction. Gradually, the aim for succession was strongly tied to coach burnout and badly connected with job satisfaction. Coaches must basically use intense-acting and authentic emotions and suppress surfaces conduct for the advantage of coaches and associations. The findings also illustrated the emotional intelligence's vital role in the surface- acting wellbeing detrimental strategy and the tight-acting voice wellbeing-beneficial strategy (Lee & Chelladurai, 2018).

The world emotional labor refers to emotional actions conducted for a salary, including: emotional sensing, assessing emotions in action, determining the best response and then acting in a manner that communicates acceptable emotions. More than 75 percent of government jobs include high emotional workforce needs, which extends throughout government profit organizations, and is particularly pertinent to street-level workers daily experience (Guy & Lee 2015).

Prestigious workshops mainly focus on the four-branch EI structure Mayer and Salovey, including brief seminars, character-plays, breakout sessions and passages. Life-reflection and contemplation in the context of an emotional note is widely used for the long lasting results of any EI experience have been shown to be enhanced and sustained. Findings from a recent meta-analysis indicate that elements of EI can be improved with proper technique, which depends on empirical observation of emotion and cognitive (Nelis, Quoidbach, Mikolajezak, & Hansenne 2009).

➤ *Aggression and Personal Drug Use*

Violent behaviour may be verbal or non- verbal that involves, but is still not restricted to, verbal and/or physical assault, abuse, threats, violence, and provocation or other inappropriate behaviour in either manner or by another media. This is something that enables a sensible person or group(s) to threaten grievous bodily harm towards any person(s) or properly (BJMP, 2012). A further thing to bear in mind is the unintentional pain as offensive, since it is not meant. Harm which is an intentional by-product of good behaviour is not also a malicious, since the harm-doer assumes that the victim is not driven to prevent it. The suffering is deliberately sought in pursuit of a higher purpose.

Authors found correlations between adolescence attitudes and corresponding parental activities to be challenging. A various studies show that adolescent issue behaviours (e.g., bullying, delinquency, antisocial behaviour) anticipate stressful household activities such as parental supervision and implementation. Awareness of whereabouts and conduct of a child when a possible predictor of effective parent-youth interaction and supervision emerged without oversight (Willoughby & Hamza, 2011).

The Canadian theorist Albert Bandura developed Social Cognitive Theory 2001. The above theory was generated while he was examining motivation. He noticed that at the time behaviourist did not consider the internal workings of a behaviour motivation technique. Through psychoanalysis, he has also seen a shortage of situation awareness. In merging environment, conduct, and cognitive reactions into the idea of social cognitive theory, inspiration and objectives are theoretically influenced nowadays. Bandura have used it to construct what he labelled the Reciprocal Triadic Determinism. That component which represents a location on a triangle which flows into one another (by Bell & Mcnabb 2016).

Expectancy Motivation Theory 2014 is a model about why persons prefer one behavioural alternative over someone else; a behaviour preference model. By doing so, it describes the process of conduct path. Unlike in other hypotheses the cognitive methodology is not overlooked by the Expectancy Principle (Redmond, 2016). Peer pressures and standard ideals are particularly significant when tackling youth behaviours. Peers effects are more influenced by established norms (what we see normal or acceptable in a group) than by the real norm (the group's real beliefs actions). The difference between expected and real is confusion and this forms the basis for the view of social norms. The concept of social norms notes that our conduct is conditioned by misunderstandings of how our peers perceive things. Correspondingly, the theory assumes that correction of misunderstandings of perceived standards will almost likely lead to a reduction in problematic or a raise in preferred conduct (Goldstein & Mortensen 2012).

Finally, in their analysis of conduct problems (CP), such as violence, robbery or fire setting, Vanderbilt-Adriance et al, (2015) is indeed a high-impact negative result that puts a tremendous burden on society and needs care from colleges, mental health facilities and the judiciary, conduct problems reported to be aligned with much more severe types of anti-social behaviour in adolescent years as early as age 3 (Shaw & Gross, 2008). Therefore, childhood can be golden opportunity for early childhood education initiatives geared at modifying pre-start anti-social behaviour paths.

➤ *Personal Drug Use*

As per the recent World Drug Report, non-medical use of prescribed drug is now becoming a serious threat to global health and police officers globally with opioids that cause the worst and most risk and account for 76% of deaths involving drug use disturbances published recently by the UN Office on Drugs and Crime (UNODC, 2018). Most people who take drugs are males; however, females have unique patterns with drug abuse (NIDA, 2020). The severity, if not significantly higher, of non-medical use of opioids and tranquilizers by female's remains proportional to that of males. Although females start to use drugs later than males, women tends to increase intake alcohol, cannabis, cocaine and opioids consumptions levels faster than men after they have begun substance use, as well as to acquire drug use symptoms more swiftly (Fedotov 2018).

There are some instances in reality, especially with younger users, which are possible causes for abuse of drugs instead of root cause. Maltreatment and negligence by parents are generally viewed parts of the causation of drug abuse. The adolescent or pre-teen may seek to get support from an unattended parent and by using drug to cope an abusive parent, repeated substance use tries may be a casual factor of drug abuse. The character performance of parents, also described by the subjects, has been confirmed in several studies (Nakhaee N. & Jadidi N.2009).

In summary, the knowledge and background provided in the literature elucidated that many studies across diverse arrays of organization so far support a significant positive influence of state self-esteem through emotional intelligence users. The results also showed the significant role of emotional intelligence on the health-detrimental strategy of deep acting and genuine expression (Nelis, Quidbach, Mikolajezak, & Hansenne, 2009). The related literatures and studies provided most needed knowledge and background for the subject under the study specifically on the relationship among the variables and how this variables and other indicators affect one another. The knowledge culled out from renowned scholars contributed with much understanding in the formulation of the theoretical framework and in the development of the questionnaire.

➤ *Theoretical Framework*

The researcher attempted to explain drug use in the work place. To have a clear understanding on the nature of personal drug use. This research was anchored on the following credible authorities (Hoffman,S.J.,Tan C.2015).

Biological, sociological and psychological concepts include three specific criminological explanations regarding drug users (Akers, 2015). Biological concepts contend that, for biological reasons, some people are prone to drug use as well as addiction. These people as seen by biological principles, are more likely experience incredibly powerful results and thus become mentally and physiologically dependent on certain medications. On the other hand, psychological studies suggest that substances dependency is triggered by certain personality characteristics and issues. The hypotheses assume drug users have personality characteristics that cause to use drugs (DiClemente, 2017).

The characteristics entail low self-worth in others, poor self-esteem, lower self-confidence and the need for motivation and excitement. Thus psychological theories insist that drug users have a personality issue which makes them more susceptible to drug use. Substance use is related, according to sociological phenomena, to many suspect of the social context such as low social ties, drug culture and peer pressures. Sociological phenomena emphasize the importance of multiple aspects of the social circle, such as socialization, social order, and family and school social ties (Wise & Koob, 2014). For example, the biggest influence has to be widely used in major metropolitan areas, such as heroin, social injustice, and a sort of social framework.

Ultimately, sociological phenomena deliver the best possibility of shaping drug laws for the treatment and prevention of substance use because most drug use derives primarily from those in the social circle, and is therefore a social problem instead of individual issue. The study is anchored on pronouncement of Berge et al, (2015) which linked state self-esteem on personal drug use influence on consequent drug use habits in adolescents and confirm to be correlated with less serious substance use effects. The sensations of intimacy in the parent-adolescent relationship are connected to the expectations of the parents that their parenting is acceptable for them and for the self-esteem of the youngsters and their involvement in family activities (Paulson, Hill, & Holmbeck, 1991). On the other hand, the concept of emotional intelligence does not focus solely on discrepancies in emotional experiences but takes into consideration aspects such as how a person treats emotions once they are enabled (Brackett, Rivers, Shiffman, Lerner & Salovey, 2006).

In like manner, this study is also anchored on the pronouncement of Nuckols (2018) which stated that drugs have been linked to aggression either been used to ameliorate uncomfortable emotional states or have been implicated in the precipitation of aggression. Not only do many of the mood altering substances impair perception but also there is proof that drugs uses through their ability to alter neurotransmitter levels alter mood state.

Further, the study is anchored on the theory of Bandura (1991) believes that a person learns by observing what offers to do. Through this one cognitively represents the behaviour of others and then possibly adopts this behaviour. The theory is relevant to this study because

through observation and internalization that drug users learn to abuse or not to abuse drugs. If on the other hand, the behaviour is negatively reinforced like falling sick, losing friends, suspended from school, then the behaviour may altogether become extinct. Parents may influence their children’s drinking through both direct modelling of alcohol use and the transmission of parental values about drinking.

➤ *Conceptual Framework*

The hypothesized models were composed of two types of latent constructs, namely exogenous and endogenous variables. The exogenous variables of this study were state self-esteem, emotional intelligence and aggression. On the other hand, the endogenous variable is personal drug use. Even though the endogenous variables had not been empirically verified, it implies that they could not be directly evaluated. With this, each latent construct was associated with multiple measures or observed variables. Thus, one of the main interests of this analysis was the extent of the correlation paths from the endogenous variable to the observable. The latent state self-esteem has three indicators namely: performance self-esteem, social self-esteem and appearance self-esteem. Self-esteem is the attitude one has toward oneself. Rosenberg, (1978) describes as entirety of the thoughts and emotions of the person in regard to himself as an object. In addition to self-esteem, self- efficacy or superiority and self-identity are important components of self-concept.

Appearance self-esteem points out that people continue to assess and analyze one self, and if they notice that they miss something else in their physical attributes, they are often more inclined to take steps to build something for them that will make them feel happy me reach their full potential and they can do it by having consumed a variety of products Schouten, (1991).

The latent emotional intelligence has six observed variables namely: emotional awareness, emotional regulation, self-motivation, social awareness, social skills and receptivity. Emotional awareness referring to ability to

recognize and make sense of not just your own emotions, but also those of others. Emotional regulation refers to the method of recognition and influence of feelings or responses to feelings. In other words, emotional regulation is the management about your impulses and related deeds. Self-motivation refers to just doing what needs to get done, without the involvement of others conditions. Social awareness refers to ability to comprehend and appropriately read to both broad problems of society and interpersonal struggles. Social skills refer to enabling connection and coordination with one another in which social standards and connections are established, expressed and non-verbal. Receptivity refers to willingness or readiness to received impression or ideas.

The latent aggression has four observed variables namely: physical aggression, verbal aggression, anger and hostility. Physical aggression refers to aggressive behaviour which can affect someone physically or emotionally, ranging through verbal abuse to physical violence. Verbal aggression refers as “a feature of temperament that tends to lead people to attack other people’s self-concepts rather than, or otherwise, their views or interaction topics. Self-concept can indeed be defined as the set of morals and principles one holds. Anger refers to an emotion which everyone feels from every now and then, normal although often unexpected or unreasonable. Hostility refers to rogue state; or animosity or discord.

Personal drug use consists of three indicators namely: recognition, ambivalence, and taking steps. Recognition refers to identification of someone or something or person from previous encounters or knowledge. Ambivalence refers to a condition of opposing responses, opinions or emotions to someone event at the same time. Taking steps refers to undertake measures (to do something) with a view to the attainment of some end. This study introduced five alternative models as shown in Figures 1 to 5 in the preceding pages. Furthermore, the five hypotheses structured models displayed potential dependencies between independent and independent variables.

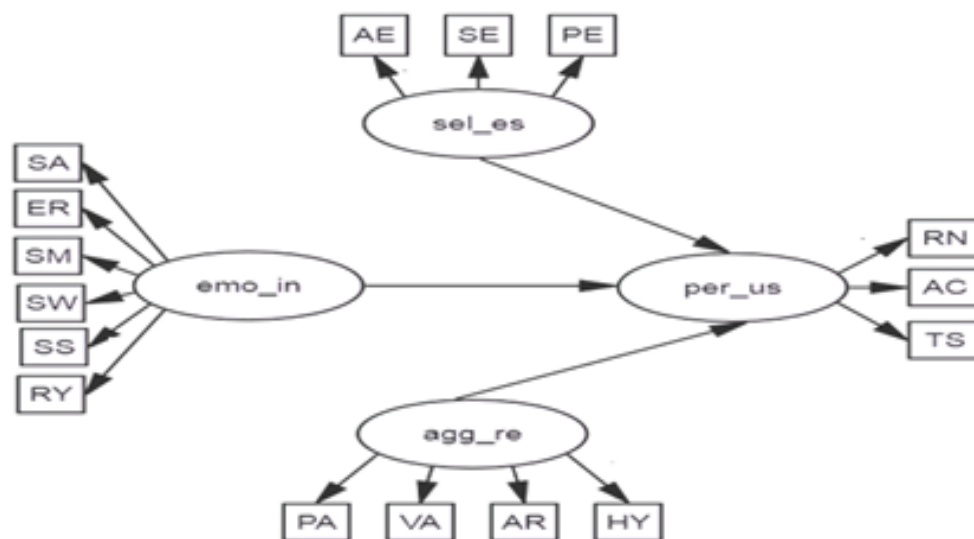


Fig 1 Hypothesized Model 1 Showing Direct Causal Relationship of Aggression, State self-esteem and Emotional Intelligence

➤ *Significance of the Study*

The global importance of this study focus on why certain individuals are more likely than others to use drugs and to be addicted to drugs. (Hanson et al., 2012). Some popular psychological explanations center on personality differences between drug users and nonusers. These explanations assume that users have personality traits that predispose them to drug use. These traits include low self-esteem and low self-confidence, low trust in others, and a need for thrills and stimulation. In effect, drug users have inadequate personalities, or personality defects, that make them prone to drug use, and once they start using drugs, their personality problems multiply. Further, this study finds the effects of substance use disorder on family and social problems and emphasizes the need for clients in treatment to address these domains in their ongoing recovery. Individual, groups, and family interventions to address these issues for clients with substances use disorder and their families are reviewed. The beneficiaries of this study were the children, youth, who were at risk and/ or were already involved in the use, sales and distribution of drugs in urban poor communities in Region XII. This study finds strategies to response drug problems which begin with the people, communities and institutions involved. People should be considered as the heart of the problem and the beginning of any solution. Further, rural setting and urban drug problems needs an individualized assessment, response, support mechanism, long-term planning and base in public policy.

III. METHOD

This chapter dealt with the discussion of research methods and procedures employed by the researcher in this study. These included the research design, research locale, population and sample, research instruments, data collection, statistical tools and ethical consideration.

➤ *Research Design*

In this study, the researcher employed quantitative non experimental research design utilizing descriptive correlation technique. In the generation of the best fit model, structural equation model (SEM) was used. Descriptive-correlation technique is a determinant of the connection of variables with various degrees of measuring. In the words of Bachman and Schutt (2011), descriptive-correlation studies provided understanding of what happens in a particular situation with a specified population and to what degree two or more variables contribute to each other.

On the other hand, the study also used the structural equation model (SEM), as noted by Schumacker and Lomax (2010), uses different forms of designs to explain interactions between the studied variables, with this same fundamental purpose of supplying the researcher with a statistical test of the conceptual design theory. Most precisely, multiple conceptual designs can be tested in SEM to evaluate how hypothesis describes and constructs related to each other. The appropriateness of research method relates to design that offers the “best fit “to answer the research questions (Maxwell, 2005). This approach has been used to determine the connection around personal drug use

for state self-esteem, emotional intelligence, aggression among drug users in Region XII.

➤ *Research Locale*

Figure 6, shows the locale of the study. The study was conducted in SOCCSKSARGEN situated in Central Mindanao as well as formally recognized as Region XII. The acronym represents the four provinces and one of the cities in the region namely: South Cotabato, Cotabato, Sultan Kudarat, Sarangani and General Santos City. The administrative capital is the city of Koronadal which settled in South Cotabato province. The city of Cotabato alone is part of SOCCSKSARGEN wherein the number of drug suspects slain during police operations in the South Cotabato, Cotabato City, Sultan Kudarat, Sarangani, and General Santos City region markedly decreased by 70 percent last year compared to 2018, only 46 drug suspects were killed during police operations in 2019 compared to 154 slain in the previous year. Police seized about P60.1 million worth of illegal drugs during the 1,528 operations conducted for the period, and with a total of 7,887.26 grams of shabu and 5,615.05 grams of marijuana were recovered. The total of 1,576 drug personalities were arrested in 2019 and were eventually charged a total of 1,141 were drug peddlers and 435 were drug users which decline the number of people engaged in illegal drugs” because of the government’s aggressive on anti-drug campaign.

➤ *Population and Sample*

A total of 400 male and female drug user surrenderres above eighteen years old under community based rehabilitation program (CBRP) in Region XII SOCCSKSARGEN were surveyed for this study. The study participants were selected using stratified random technique. Stratified sampling is a kind of sampling method whereby divides the overall population onto smaller units or strata in order to accomplish the sampling procedure.

The strata are founded on the basis of some common features in population figures. The researcher chose the sample correspondingly at random by splitting the population into strata. In structural equation modelling, the researcher is required a much large enough sample volume to hold onto power and get reliable projections of parameters and standardized errors. Perhaps partly due to some kind of course a requirement is the need for larger populations, and the various observed variables are used to describe latent variables (Bachman and Shutt, 2011).

Further, Hoelter (1983) cited that the Critical N (CN) statistic, where $CN \geq 200$ was deemed appropriate. This sample size affects the lowest fit function estimate in the modified model. There were four Provinces and one city in Region XII were the subject locale of the study, where a total number of 400 respondents were taken. Several studies with a good model and multivariate normal data a sample size of 400 is relatively reasonable. (Boomsma, 1997), although there are examples in the literature that uses smaller samples. To qualify as respondents, the drug users must be a surrenderre belonging or went through a community based rehabilitation program in Region

X11. Additionally only those who were willing to participate and have given their consent were included in the study, and those who will not qualify for the study were minor below eighteen (18) years old under parental guidance, unable to read and write. Exclusion criteria include those who are not available at the time of the data collection, those who are not willing to participate. Meanwhile withdrawal criteria include those instruments not personally answered by the drug users or instrument filled out through cheating or copying with fellow drug users surrenderee; and those who violate the given instructions and rules of privacy and confidentiality.

➤ *Research Instrument*

This study adapted downloaded questionnaire from web sources. The questionnaire has been revised to only include the topics applicable to the study. The manuscript was initially presented to the researcher's adviser for advice and recommendations, has the overall mean ratings of the panel validation. After the experts' validation, the reliability of the questionnaire was checked using the Cronbach Alpha of .761 result of Re pilots study; Cronbach Alpha based on standardized items .759 were the alpha coefficient for the 24 items is .868, suggesting that the items have relatively high internal consistency. As articulated by Gliem (2003). The alpha reliability coefficient of cronbachs usually ranges from 0 to 1. In this study four instruments were used, namely; state self-esteem questionnaire, emotional intelligence questionnaire, aggression questionnaire, and personal drug use questionnaire. The instrument for self-esteem was adapted from Heatherton and Polivy (1991). The state self-esteem scale instrument is composed of 20 items divided into four (3) subscales; performance self-esteem, social self-esteem and appearance self-esteem. In evaluating the self-esteem responses, the scale below was used.

➤ *Data Collection*

The data collection were gathered following the hereunder procedures: The researcher sought authority or approval from the Regional Director of the PNP PRO XII to conduct research study in the said area of Region XII from November 1 to 30, 2018 which the Dean of Professional Schools has duly noted. The preliminary draft questionnaire was forwarded to the Research Adviser for potential modification and remarks; thereafter, the questionnaire was transferred to the review panel for usability and affirmation. Upon approval, the questionnaires were administered by the researcher to conduct pilot testing to ensure the validity and reliability. The relevance of the items to the objectives of the study was assessed to ensure comprehensive context coverage. The set of questionnaires were administered to a sample of 20 drug users' surrenderees in one Barangay before the actual survey.

The researcher assured them the confidentiality for the information they would provide. This was to increase confidence among the drug- user surrenderees that none of the information shared be used against them. The survey had been undertaken during the second semester of the 2018-2019 academic year. A Certificate of Appearance signed by the PNP PRO XII Regional Director to ensure that

the researcher honestly gathered the data from the respondents. The data collected by the researcher were measured, tabulated, analyzed and interpreted on the basis of the study intent.

IV. RESULTS

Introduced in this chapter are the findings and results on personal drug use among substance users through state of self-esteem, emotional intelligence and aggression as factors. Analyses and interpretations of data were made in the order of the objectives of the study posed earlier.

➤ *Level of State Self Esteem Among Drug Users*

The level of state self-esteem among drug user is presented hereunder and items of the indicators of these variables were analysed and interpreted as shown in table 1. It could be gleaned from Table 1 that the indicator with the highest mean rating of 3.57 or high is appearance self-esteem. In contrast, indicator with the lowest mean of 3.27 though still described as moderate is social self-esteem. The rest of the indicators are organized from the highest to the lowest average with their respective descriptive interpretation. To facilitate thorough understanding on the facets of state self-esteem, the detail of the indicators of this variable is staged in this section.

Table 1 Level of State Self-Esteem Among Drug Users

Indicator	SD	Men	Descriptive Level
Performance Self Esteem	0.67	3.47	High
Social Self-Esteem	0.72	3.27	Moderate
Appearance Self-Esteem	0.70	3.57	High
Overall	0.53	3.44	High

Starting with performance self-esteem appended table 1.1 had means ranges from 3.21 to 3.95 with overall rating of 3.47 or high and square root of variance of 0.67. Moreover, items of performance self-esteem are arranged from highest to lowest average of 3.95 or high for feeling confident about my abilities, 3.80 or high for feeling confident that I understand things 3.51 or high for feeling smart as others; 3.35 or moderate for feeling that I have less scholastics ability right now than others; 3.26 or moderate for feeling that I am having trouble understanding things that I read; 3.22 or moderate for feeling frustrated or rattled about my performance; and 3.21 or moderate for feeling like I'm not doing well.

In addition, appended table 1.2 expresses the level of state self-esteem among drug user in terms of social self-esteem had means 3.04 to 3.51 with over all mean of 3.27 or moderate and square root of variance of 0.72. The data for social self-esteem is classified from highest to lowest average of 3.51 or high for feeling self-conscious, 3.41 or high for feeling concerned about the impression I am making; 3.38 or moderate for being worried about what other people think of me; 3.25 or moderate for being worried about whether I am regarded as success or failure;

3.15 or moderate for feeling displeased with myself and feeling inferior to others at this moment; and 3.04 or moderate for being worried about the impression I am making. Subsequently, appended table 1.3 shows the level of state self-esteem among drug user in terms of Appearance Self-Esteem had means ranges from 3.11 to 3.84 with overall rating of 3.57 or high and standard deviation of 0.70. The data is sorted out from highest to lowest means ratings: 3.84 or high for feeling good about myself; 3.72 or high for feeling that others respect and admire me; 3.71 or high for feeling satisfied with the way my body looks right now; and 3.63 or high for being pleased with my appearance right now; 3.39 or moderate for being dissatisfied with my weight; and 3.11 or moderate for feeling unattractive.

➤ *Level of Emotional Intelligence Among Drug Users*

The level of emotional intelligence with the corresponding indicators are viewed in Table 2 and is arranged from the highest to the lowest average with their respective qualitative description and square root of variance. Each indicator is examined and interpreted in a simpler way to give the reader a clearer understanding of this one. The data for this variable had average ratings ranges from 3.59 to 3.74 with overall mean of 3.66 or high with square root of variance of 0.46.

Table 2 Level of Emotional Intelligence Among Drug Users

Indicator	SD	Men	Descriptive Level
Self-Awareness	0.61	3.066	High
Emotional Regulation	0.57	3.59	High
Self-Motivation	0.58	3.58	High
Social Awareness	0.55	3.61	High
Social Skills	0.63	3.74	High
Receptivity	0.60	3.67	High
Overall	0.46	3.66	High

Table 2, the level of emotional intelligence among drug user in Region X11 with highest mean rating of 3.74 or measure as high social skills. It means that drug users oftentimes manifested, with the lowest rating of 3.59 or measured as high emotional regulation. It means that drug users oftentimes manifested, with corresponding overall average of 3.66 or qualitatively described as high and equivalent square root of variance of 0.61 measured as high.

For the social skills indicator alone, the mean rating was 3.74 or high; self-motivation earned a mean rating of 3.68 or higher; receptivity rated as high with mean score of 3.67; self-awareness yielded a mean rating of 3.66 or high; social awareness gained a rating of 3.61 or high; emotional regulation attained a mean rating of 3.59 or high.

The data for the indicators of emotional intelligence among drug user are mounted based in the order of the appended tables. Table 2.1 shows the level of self-awareness had means from 3.66 to 3.80 with overall mean rating of 3.66 or high and standard deviation of 0.61. The mean scores

are arranged from highest to lowest level 3.80 or high for trying to learn from experiences; 3.77 or high for the items for being aware of my strengths and weaknesses; 3.73 or high for understanding the relationship between my feelings and what I think, what to do and what I say; 3.65 or high for going for original ideas while solving a problem; 3.61 or high for recognizing how my feelings affect my performance; and 3.43 or high for believing that I can make sound decisions despite of uncertainties and pressures.

The mean values for emotional regulation in Appendix Table 2.2 ranged from 3.33 to 3.83 with an overall mean rating of 3.59 or a high with a standard deviation of 0.57. Items of the emotional regulation are analysed from the highest to the lowest average ratings; 3.83 or high for keeping myself calm in conflicting and upsetting problems; 3.81 or high for feeling happy and satisfied about my life at present; 3.73 or high for believing that I can obviously predict whether my emotion is happy or sad; 3.70 or high for managing my impulsive feelings and disappointing emotion well; 3.66 or high for knowing how to keep myself calm in conflicting and upsetting problems; 3.53 or high for believing that I can avoid external temptations to fulfil my dreams; 3.37 or moderate for getting carried away with my imagination and day dreaming most often; 3.36 or moderate for believing that when I hear bad news, I usually can't control myself and feel sad and miserable; and 3.33 or moderate for feeling depressed for one reason or the other.

Appended table 2.3 is the level of emotional intelligence among drug user in terms of self-motivation had means ranges from 3.48 to 3.83 with overall mean rating of 3.68 or high with square of variance of 0.58. The items of self-motivation are analysed from highest to lowest means ratings 3.83 or high for learning in order to improve my performance; 3.81 or high for being determined in achieving goals despite obstacle and setbacks; 3.77 or high for believing that before beginning something new, I usually feel that I will succeed; 3.76 or high for possessing good confidence in taking sole responsibility and taking decisions by my own; 3.56 or high for holding accountable for meeting my objectives; 3.55 or high for being generally motivated to continue, even when situations become worse to handle; and 3.48 or high for believing that when working a team, I like to depend upon others ideas than my own.

Appended table 2.4 is the level of emotional intelligence among drug user in terms of social awareness had ranges from 3.44 to 3.68 with overall mean rating of 3.61 or high with square root of variance of 0.55. The items are ranked out from the highest to lowest means rating 3.68 or high for showing sensitivity and understand others' point of view; 3.67 or high for seeing variety in people as opportunity, creating an environment where diverse people can prosper; 3.64 or high for respecting and relating well to people from different backgrounds; 3.62 or high for understanding the way others think, feel and behave; 3.61 or high for believing that I can tell how others are feeling by listening to their tone of voice; and 3.44 or high for believing that others think that I lack confidence in interacting with others.

Appended table 2.5 emphasizing the level of emotional intelligence among drug user in terms of social skills had means ranges from 3.60 to 3.89 with overall mean ratings of 3.74 or high with square root of variance of 0.63. The findings are sequenced from highest to lowest means ratings 3.89 or high for maintaining a balance between work and relationships; 3.81 or high for making and maintaining personal friendships among work associates; 3.71 or high for promoting open communication and ready to accept both bad and good news and believing that I can handle difficult people and tense situations with diplomacy and tact; 3.69 or high for being easy to get friendly and possess good social skills; and 3.60 or high for being extremely polite & respectful to others irrespective of the unfavourable circumstances.

Appended table 2.6 shows the level of emotional intelligence among substance user in terms of Receptivity had means ranges from 3.41 to 3.81 with over all mean rating of 3.67 or high with square root of variance of 0.60. The results of receptivity are set up from highest to lowest mean ratings 3.81 or high for having like to cooperate with others in accomplishing a task; 3.79 or high for helping others in coming out of difficult situations; 3.74 or high for extending support and advice to others when needed; 3.72 or high for listening well, seek mutual understanding and fully welcome sharing of information; 3.62 or high for offering useful feedback and identify people’s needs for development; 3.59 or high for believing that others find it comfortable to disclose their personal problems; and 3.41 or high for believing that it’s not easy for me to accurately reflect people’s feeling back to them.

➤ *Level of Aggression Among Drug Users*

The aggression among drug user with reference to the four indicators is shown in Table 3 with overall mean rating of 3.08 or qualitatively described as moderate and square root of variance of 0.76 measured as moderate level it could be viewed from the findings that the indicator with the highest mean rating of 3.18 or moderate is Verbal Aggression, means drug users sometimes manifested with the lowest mean rating of 3.01 or moderate for aggression it means that drug users sometimes manifested, 3.07 or moderate for anger.

Table 3 Level of Aggression Among Drug Users

Indicator	SD	Mean	Descriptive Level
Physical Aggression	0.91	3.01	Moderate
Verbal Aggression	0.77	3.18	Moderate
Anger	0.88	3.07	Moderate
Hostility	0.94	3.05	Moderate
Overall	0.76	3.08	Moderate

On the other hand, hostility acquired a mean rating of 3.05 or described as moderate. In consonance items involved in the indicators of aggression among drug user are presented above.

Appended table 3.1 demonstrates the level of aggression among drug user in terms of physical aggression had means ranges from 2.85 to 3.28 with overall mean rating of 3.01 or moderate and square root of variance of 0.91. The data are depicted from highest to lowest mean ratings, 3.28 or moderate for believing that I will resort to violence to protect my rights if necessary; 3.08 or moderate for believing that there are people who pushed me so far that we came to blows; 3.02 or moderate for believing that if somebody hits me, I hit back; 2.98 or moderate for being given enough provocation, I may hit another person; 2.95 or moderate for believing that I cannot control the urge to strike another person; 2.94 or moderate for having threatened people I know; and 2.85 or moderate for having become so mad that I have broken things.

In conjunction with, appended table 3.2 features the level of aggression among drug user in terms of verbal aggression had means ranges from 3.04 to 3.35 with overall rating of 3.18 or moderate and standard deviation of 0.77. The data clustered from highest to lowest means ratings of 3.35 for telling my friends openly when I disagree with them; 3.22 or moderate for believing that when people annoy me, I may tell them what I think of them; 3.14 or moderate for finding myself disagreeing with people; and believing that I can't help getting into arguments when people disagree with me; and 3.04 or moderate for believing that my friends say that I'm somewhat argumentative.

Appended table 3.3 accentuates the level of aggression among drug user in terms of anger had means ranges from 2.91 to 3.40 with overall mean rating of 3.07 or moderate with square root of variance of 0.88. Details of the data are presented from highest to lowest mean rating 3.40 or moderate for flaring up quickly but get over it quickly; 3.09 or moderate for believing that when frustrated, I let my irritation show; 3.04 or moderate for having trouble controlling my temper; and 2.91 or moderate for feeling like a powder tub ready to explode, and believing that some of my friends think I'm a hothead.

Appended table 3.4 emphasizing the level of Aggression among substance user in terms of Hostility had means ranges from 2.83 to 3.18 with overall mean ratings of 3.05 or moderate with square root of variance of 0.94. The findings are sequenced from highest to lowest means ratings of 3.18 or moderate for being suspicious of overly friendly strangers; 3.15 or moderate for knowing that "friends" talk about me behind my back; 3.07 or moderate for wondering why sometimes I feel so bitter about things; 3.01 or moderate for feeling that people are laughing at me behind me back; and 2.83 or moderate for being eaten up with jealousy.

➤ *Level of Personal Drug Use Among Drug Users*

The level of personal drug use among drug user is analyzed and interpreted based on the statistical results of the following indicators; recognition, ambivalence, and taking steps. It is reflected in Table 4 that the level of personal drug use among drug user had means ranges from

3.11 to 3.80 with overall mean rating of 3.39 or moderate with square root of variance of 0.74.

moderate for wondering if I am in control of my drug use; and 2.91 or for wondering if I am an addict.

Table 4 Level of Personal Drug Use among Drug users

Indicator	SD	Mean	Descriptive Level
Recognition	0.97	3.27	Moderate
Ambivalence	1.06	3.11	Moderate
Taking Steps	0.79	3.80	High
Overall	0.74	3.39	Moderate

Analyzing further, taking steps garnered the highest mean score of 3.80 or high it measured that personal drug use is oftentimes manifested with the lowest indicator rating of 3.11 or moderate for ambivalence that measures personal drug use sometimes manifested.

Appended 4.1 is the level of personal drug use among drug user in terms of recognition had means ranges from 2.96 to 3.63 with overall mean rating of 3.27 or moderate with square root of variance of 0.97. The mean score of the items are classified from highest to lowest, 3.63 or high for believing that I really want to make changes in my use of drugs; 3.61 or high for believing that if I don't change my drug use soon, my problems are going to get worse; 3.37 or moderate for believing that my drug use is causing a lot of harm. 3.13 or moderate for having a drug problem; 3.11 or moderate for knowing that I have a drug problem; 3.11 or moderate for knowing that I have a drug problem; and 2.96 or moderate for being a drug addict.

Appended table 4.2 level of personal drug use among drug user in terms of Ambivalence had means ranges from 2.91 to 3.23 with overall mean rating of 3.11 or moderate with square root of variance of 1.06. The data of this indicator is classified from highest to lowest mean rating 3.23 or moderate for believing that there are times when I wonder if I use drugs too much; 3.18 or moderate for wondering if my drug use is hurting other people; 3.12 or

Appended table 4.3 emphasizes the level of personal drug use among drug user in terms of taking steps had means ranges from 3.69 to 3.88 with overall mean rating of 3.80 or high with square root of variance of 0.79. The data for taking steps organized from highest to lowest mean rating 3.88 or high for wanting help to keep from going back to the drug problems that I had before; and having made some changes in my drug use, and I want some help to keep from going back to the way I used before; 3.87 or high for being actively doing things now to cut down or stop my use of drugs; 3.78 or high for having already changed my drug use, and I am looking for ways to keep from slipping back to my old pattern; 3.77 or high for using drugs too much at one time, but I've managed to change that. 3.74 or high for believing that I'm not just thinking about changing my drug use; I'm already doing something about it; and 3.69 or for having already started making some changes in my use of drugs.

➤ *Significance on the Relationship Between State Self-Esteem and Personal Drug Use Among Drug User in Region XII*

Divulged in Table 5 is the significance on the relationship between state self-esteem and personal drug use with overall computed r-value of .343 and .000 very much lower than 0.5 level of significance set in this study. Hence, null hypothesis is rejected in favor to the alternative hypothesis that there is significant relationship between state self-esteem and personal drug Use. This means that high state self –esteem in personal drug use among drug user. Analyzing further, performance self-esteem is correlated to: recognition with r-value of .326 and p-value of .000 (Significant); ambivalence with r-value of .273 and p-value of .000 (Significant); taking steps with r-value of .165 and p-value of .001 (Significant); The overall results on the correlation between performance self – esteem and personal drug use obtained an r-value of .330 and p-value of .000 (Significant).

Table 5 Significance on the Relationship between State Self-esteem and Personal Drug Use among Drug User

State Self-esteem	Personal Drug Use			
	Recognition	Ambivalence	Taking Steps	Overall
Performance Self-esteem	.326** (.000)	.273** (.000)	.165** (.001)	.330** (.000)
Social Self-esteem	.224** (.000)	.244** (.000)	.038 (.447)	.227** (.000)
Appearance Self-esteem	.232** (.000)	.099* (.049)	.244** (.000)	.234** (.000)
Overall	.338** (.000)	.267** (.000)	.193** (.000)	.343** (.000)

In addition social self-esteem is correlated to recognition with r-value of .224 and p-value of .000 (Significant); ambivalence with r-value of .244 and p-value of .000 (Significant); taking steps with r-value of .038 with r-value of .447 (Significant); The overall result on the correlation between social self –esteem and personal drug use gained an r-value of .227 and p-value of .000 (Significant);

➤ *Significance on the Relationship between Emotional Intelligence and Personal Drug use Among Drug User in Region XII*

Shown in Table 6 is the relationship between emotional intelligence and personal drug use with overall r-value .204 and p-value of .000 very much lower than .05 level of significance in this study. It is therefore stated that emotional intelligence provides significant on personal drug use. The finding signifies that in every increase of emotional intelligence increases personal drug use. Presenting the details of the data, self-awareness is correlated to recognition with r-value of .102 and p-value of .041 (Significant); ambivalence with r-value of .039 and p-value of .442 (Non-Significant); taking steps with r-value of .297 and p-value of .000,(significant); The overall results on the correlation between self-awareness and personal drug use gained an r-value of .168 and p-value of .001,(Significant) In the same view, emotional regulation correlated to recognition with r-value of .216 and p-value of .000 (Significant); ambivalence with r-value of .078 and p-value

of .118 (Non-Significant); taking steps with r-value of .313 and p-value of .000, (significant);

The overall results on the correlation between emotional regulation and personal drug use gained an r-value of .242 and p-value of .000, (significant); On the other hand, self-motivation correlated to recognition with r-value of .152 and p-value of .002 (significant); ambivalence with r-value of .044 and p-value of .382 (non-significant); taking steps with r-value of .225 and p-value of .000, (significant); The overall results on the correlation between self-motivation and personal drug use gained an r-value of .167 and p-value of .001, (significant);similarly, social awareness correlated to recognition with r-value of .184 and p-value of .000 (significant); ambivalence with r-value of .104 and p-value of .037 (significant); taking steps with r-value of .263 and p-value of .000, (significant); the overall results on the correlation between social awareness and personal drug use gained an r-value of .223 and p-value of .000, (significant);

Table 6 Significance on the Relationship between Emotional Intelligence and Personal Drug Use among Drug User

Emotional Intelligence	Personal Drug Use			
	Recognition	Ambivalence	Taking Steps	Overall
Self-awareness	.102* (.041)	.039 (.442)	.297** (.000)	.168** (.001)
Emotional Regulation	.216** (.000)	.078 (.118)	.313** (.000)	.242** (.000)
Self-Motivation	.152** (.002)	.044 (.382)	.225** (.000)	.167** (.001)
Social Awareness	.184** (.000)	.104* (.037)	.263** (.000)	.223** (.000)
Social Skills	.093 (.062)	-.047 (.350)	.261** (.000)	.111* (.027)
Receptivity	.061 (.223)	-.040 (.423)	.156** (.002)	.062 (.213)
Overall	.169** (.001)	.035 (.487)	.323** (.000)	.204** (.000)

Presenting the details of the data of social skills correlated to recognition with r-value of .093 and p-value of .062 (significant); ambivalence with r-value of .047 and p-value of .350 (Non-Significant); taking steps with r-value of .261 and p-value of .000, (Significant); The overall results on the correlation between social skills and personal drug use gained an r-value of .111 and p-value of .027, (significant);nonetheless, receptivity correlated to recognition with r-value of .061 and p-value of .223 (non-significant); ambivalence with r-value of .040 and p-value of .423 (non-significant); taking steps with r-value of .156 and p-value of .002, (Significant); The overall results on the correlation between receptivity and personal drug use gained an r-value of .062 and p-value of .213, (non-significant);

➤ *Significance on the Relationship between Aggressions and Personal Drug Use Among Drug User in Region XII*

Table 7 is the significance on the relationship between aggression and personal drug use with overall r-value .404 and p-value of .000 very much lesser than .05 level of significance set in this study. Thus, the rejection of the null hypothesis and it is stated therefore that there is significant relationship between aggression and personal drug use.

Articulating the details of the data, physical aggression correlated to recognition with r-value of .421 and p-value of .000. (significant) ambivalence with r-value of .454 and p-value of .000.(Significant) taking steps with r-value of .376 and p-value of .000. (significant) The overall results on the correlation between physical aggression and personal drug use gained an r-value of .376 and p-value of .000 (significant) consequently, verbal aggression is correlated to recognition with r-value of .324 and p-value of .000. (significant) ambivalence with r-value of .356 and p-value of .000.(significant) taking steps with r-value of .045 and p-value of .369. (Significant)

The overall results on the correlation between verbal aggression and personal drug use gained an r-value of .295 and p-value of .000 (significant) presenting the details of the data of anger is correlated to recognition with r-value of .426 and p-value of .000. (significant) ambivalence with r-value of .445 and p-value of .000. (significant) taking steps with r-value of .027 and p-value of .596. The overall results on the correlation between verbal aggression and personal drug use gained an r-value of .295 and p-value of .000 (significant)

Table 7 Significance on the Relationship between Aggression and Personal Drug Use among Drug User

Aggression	Personal Drug Use			
	Recognition	Ambivalence	Taking Steps	Overall
Physical Aggression	.421** (.000)	.454** (.000)	-.068 (.175)	.376** (.000)
Verbal Aggression	.324** (.000)	.356** (.000)	-.045 (.369)	.295** (.000)
Anger	.426** (.000)	.445** (.000)	-.027 (.596)	.388** (.000)
Hostility	.350** (.000)	.417** (.000)	-.039 (.439)	.337** (.000)
Overall	.440** (.000)	.484** (.000)	-.051 (.305)	.404** (.000)

Furthermore, hostility is correlated to recognition with r-value of .350 and p-value of .000. (Significant) ambivalence with r-value of .417 and p-value of .000. (Significant) taking steps with r-value of .039 and p-value of .439. The overall results on the correlation between hostility and personal drug use gained an r-value of .404 and p-value of .000 (Significant)

Table 8 Significance on the Influence of the Exogenous Variables on the Personal Drug Use among Drug User

Exogenous Variables		Personal Drug Use			
		B	B	t	Sig.
State Self-esteem		.208	.150	2.534	.012
Emotional Intelligence		.123	.077	1.463	.144
Aggression		.310	.318	6.136	.000
R	.442				
R ²	.195				
F	32.072				
ρ	.000				

Table 8 is the significance on the Exogenous Variables on the Personal Drug Use among Drug User with computed F-value of 32.072, R-value of .442 and p-value of .000 very much lower than 0.5 level of significance set in this study. It could be noted from the data that the adjusted R² value equivalent to .195 signifies that 19.5% of significance on the exogenous variables on the personal drug use among drug user.

The difference of 80.5% is attributed to other factor not considered in the present study. The suitable implies further that personal drug use is predictor of drug user. Details of the findings are emphatically pointing to state self-esteem with standardized and unstandardized coefficient of .208 and .150 t-value of 2.534 and p-value of .012 (significant) Emotional Intelligence had standardized and unstandardized coefficient of .123 and .077 t-value of 1.463 and p-value of .144 (significant) aggression had standardized and unstandardized coefficient of .310 and .318 t-value of 6.135 and p-value of .000 (significant)

➤ *Establishing the Best Structural Model*

This section highlights the analysis on the relationships among state self-esteem, emotional intelligence and aggression personal drug use. There are four alternative models tested to achieve the best fit model

of personal drug use among drug users. Each model has a framework that could be decomposed into two sub models which are measurement model and structural model. The measurement model represents the measures loads on each factor to their latent construct while the structural model defines relationships among the latent variables. Moreover, the assessment of fit was used as baseline to accepting and rejecting the model. As a rule the researcher establishes the relationship of the causality relationship of the latent variable toward the latent variables. Furthermore, it institutes the relationship between the endogenous and exogenous variables. The moment that structured model exhibits with suitable fit, it underscores that there is consistency of the empirical relationship among variables inferred by the model. The model parameters estimates entail the magnitude and direction of the relationships among the variables.

➤ *Direct and Indirect Effect*

There were four hypothesized (conceptual) models formulated and tested in this study. Screening of variables was critically observed to give premium on the normality of the data. Variables with interval or ratio data were counted in the formulation of models. Generated models of this study were solicited with theories.

Figure 6 presents the hypothesized model 1, where all the paths are pointing from independent variables to dependent variables signifies the direct link of state self-esteem, emotional intelligence and aggression on the way to personal drug use with the assumptions that the independent variables bear significant influence on the dependent variable.

In Figure 2 underlines how predictor variables manifest an intervening effect on the outcomes measures. The direct effects are represented by arrows from a predictor

variable usually at the left side to the right side where the dependent variable is, without passing through another variable. The indirect effects are relationship between predictor variable and dependent variable which are mediated by passing through one or more variables in between. The magnitude of the indirect effects is determined by cross multiplying the coefficients for any path combinations which connects the predictor variable on the left side with dependent variable on the right side and eventually summing up to get its total.

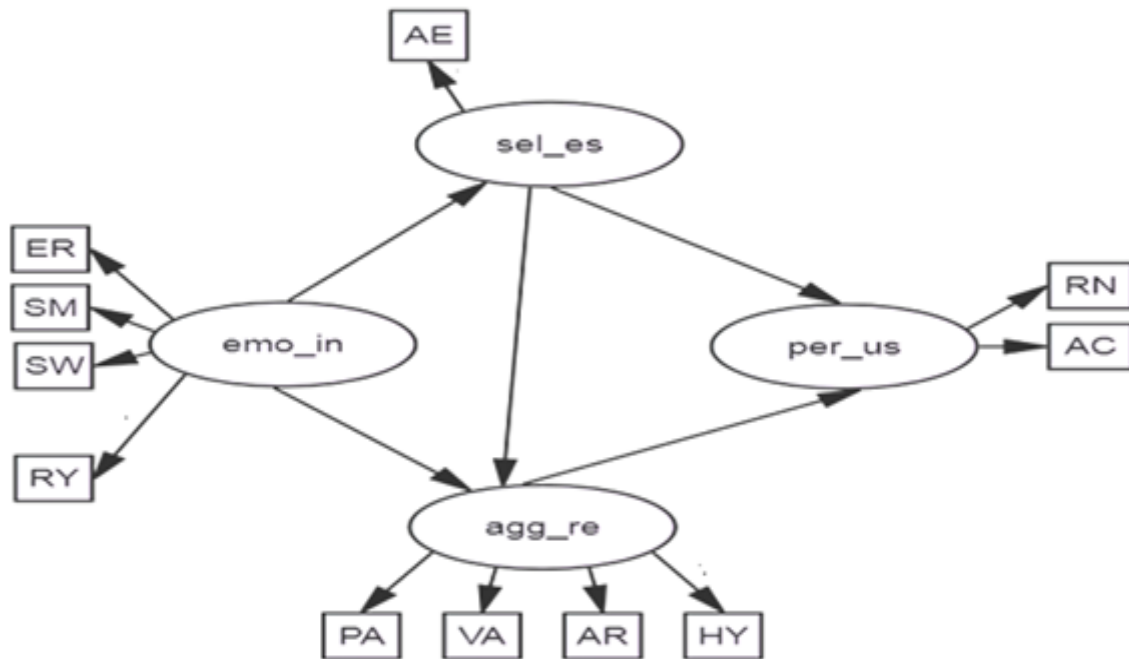


Fig 2 Best Fit Model

V. DISCUSSION

This chapter is the discussion of the findings based on the statistical results concerning state self-esteem, emotional intelligence, aggression and personal drug use among drug users in Region XII. Discourse on the significance relationship and influence of the independent variables on personal drug use as well as the construct of best fit model on personal drug use are comprehensively presented with supporting principles, concepts, ideas and theories which helped to solidify the conclusion and recommendation of the study.

➤ *Level of State Self-Esteem Among Personal Drug Use*

The level of state self-esteem among drug user in Region X11 come with the highest mean rating of 3.57 or measure as high appearance of self-esteem. It means that drug users oftentimes manifested, with the lowest rating of 3.27 or measured as moderate social self-esteem. It means that drug users sometimes manifested, with corresponding overall mean of 3.44 or qualitatively described as high and equivalent standard deviation of 0.53. The indicators overall rating for performance self-esteem ranges to 3.47 or high.

In addition social self-esteem had overall means of 3.27 or moderate and subsequently shows that appearance self-esteem had ranges overall rating of 3.57 or high. The high level of state self-esteem in terms of performance self-esteem is allied to the view point of performance self-esteem. Theorists have long hypothesized that the self-esteem of individuals and their social interactions affect one another. In summary, the results indicate that the correlation between the social relationships of individuals and their level of self-esteem is genuinely mutual in all life-span developmental stages, suggesting a positive feedback loop between the buildings (Harris and Orth, 2019).

On the other hand the moderate social self-esteem among substances users is parallel to the conceptual analysis. According to the study of Maslow's Principle of the Social hierarchy considering esteem can resemble Maslow's fourth stage pyramid: esteem values. While those needs and the idea of self-esteem are definitely linked, Maslow's need for esteem is much more based on outward indicators of esteem, such as value, rank, acceptance, achievement, and reputation (McLeod, 2017).

In this sense, esteem refers to constructions like self-esteem, perceptions of success, attainment, trust, reverence to others and compassion for others. Co-dependent people might have a propensity to participate in dysfunctional relationships (Bacon, McKay, Reynolds & McIntyre, 2018) that may not demonstrate respect and understanding, hampering confidence building. It is evident in such circumstances that co-dependence may theoretically hinder the productive fulfilling of affection / devotion and appreciation needs.

➤ *Level of Emotional Intelligence Among Personal Drug Use*

The high level on emotional intelligence among drug user in terms of emotional awareness, emotional regulation, self-motivation, social awareness, social skills and receptivity with overall rating of means 3.66 or high for the indicators social skills ranges overall means of 3.74 or high, followed by self-motivation with overall means 3.68 or high, Receptivity that ranges overall means of 3.67 or high, Self-awareness with overall means of 3.66 or high also Social awareness that ranges overall means of 3.61 or high and lastly the Emotional regulation that ranges lowest means of 3.59 or high.

The high level of emotional intelligence among drug user in terms of social awareness concurred the assertion of Andersen & Collins (2015) that ideology about people who belong to dominant groups perpetuates oppression and privilege. People in dominant groups are considered the ideal standard by which people in subordinate groups are measured. Through socialization, ideology about dominant and subordinate groups can become so embedded and internalized that it can be considered common sense knowledge. This can cause oppression to be enacted consciously and unconsciously through the normal processes of life (Mullaly, et.al 2014)

The high level of emotional intelligence among drug user in terms of social skills to the concept of Leff and Posner (2009), states that social learning concepts highlight the importance of the social framework and indicate that persons will learn by watching the acts of others whether such persons are empowered in a detrimental way when they demonstrate aggressive tendencies. The high level of emotional intelligence among drug user in terms of receptivity is supported by several authors like Karakowsky and Miller, (2002), which states that there are signs that an individual will be more receptive to feedback seeking behaviour can sometimes indicate receptivity towards negative feedback, unless the feedback seeker is only trying to hear praise without criticism.

➤ *Level of Aggression Among Personal Drug Use*

The level of aggression among personal drug use with overall mean rating of 3.08 or qualitatively described as moderate and standard deviation of 0.76 measures as moderate level. It can be viewed through the results that the indicator with the highest mean rating of 3.18 is verbal aggression, which means moderate with the lowest mean rating of 3.01 is physical aggression, which means

moderate. On the other hand, anger acquired a mean rating of 3.07 or described as moderate and hostility acquired a mean rating of 3.05 or described as moderate. The moderate level of aggression in terms of *physical aggression* draws attention of Tremblay et, al (2014) which states that physical violence exhibited by adolescents and young adults is a major concern in all modern societies.

The moderate level of aggression in terms of *verbal aggression* signifies the statement of Kendra Cherry (2019) which states that impulsive aggression is marked by powerful emotions, probably resentment. This kind of aggression is often not intended and sometimes occurs in the wrong situation. Though one sometimes imagine of aggression as merely physical modes, such as striking or pressing, psychological aggression can also be quite harmful. Terrifying or verbally harassing someone else.

The level of aggression in terms of *anger* draws the attention of Gregg Henrique's (2015) The center of anger resides in the context of emotion, that is, the nature of anger is an observed sensory-response system that is triggered when a person understands that his or her wishes are abused or insulted by someone else. In individuals, angry feels trigger self-conscious thoughts concerning inequality and also how others should have been and guide a person to activities in order to correct the perceived mistakes.

The moderate level of aggression in terms of *hostility* signifies the statement of (Hughes & Gullone, 2008) which states that symptoms and disorders are relatively common during adolescence and impact considerably on social and emotional functioning. Further Barefoot et al. (1993) states also that they went beyond a triad of hostility-anger-aggression and described a rather wide range of behaviour and emotional correlates of hostility.

➤ *Level of Personal Drug Use Among Drug User*

The level of personal drug use among drug user with overall mean rating of 3.39 or qualitatively described as moderate with standard deviation of 0.74 measures as moderate level. It can be viewed through the results that indicator with the highest mean rating of 3.80 is taking steps which means high. Ambivalence acquired the lowest mean rating of 3.11 which means moderate. On the other hand, recognition acquired a mean rating of 3.27 which means moderate. Atkinson (2000) described object recognition as deciding the meaning of an object, it is described as being survival as if we do not know what an object is, and we cannot react to it in an appropriate way.

The moderate level of personal drug use in terms of ambivalence support the concepts of Schreiner (2015) intuitively it seems to make more sense to focus in all the reasons for movement, to keep encouraging that forward progress by reinforcing the positive benefits of enacting and then maintaining some lifestyle change. The level of personal drug use in terms of taking steps Robinson & Smith, M.A. (2018) who accentuated that double assessment complicates rejection. Rejection is popular when it comes to addiction. It is often difficult to recognize what you rely on

alcohol or drugs, or how they take over your life. Recovery is inside your control, however do not seek to go through with it; justifying and rationalizing "JUST ONE MORE" is quite convenient. Even if you choose to recover, you still depend on self-help services, undergo counselling or carry a self-directed path to care, Assistance is important.

➤ *Correlations Between Variables*

The significance on the relationship across state self-esteem and personal drug use among substance user indicated the rejection of the null hypothesis support the alternative hypothesis that there is significance relationship between state self-esteem and personal drug use among substances users. The overall results on the correlations between indicators of state self-esteem in terms of performance self-esteem, social self-esteem and appearance self-esteem are gained with overall results on the correlation between performance self-esteem and personal drug use obtained an r-value of .330 and p-value of .000 (significant), for social self-esteem and personal drug use gained an r-value of .227 and p-value of .000 (significant) and appearance self-esteem and personal drug use gained an r-value of .234 and p-value of .000 (significant).

The findings support the pronouncement of WU et al, (2014) which stated that teenagers with low self-esteem engaged in drug use as way to cope with feelings and escape from stressors. Some findings noted a significant association low self-esteem and the specified risk behaviours. One of determining factors that encourage high level of appearance self-esteem is personal drug use. The reactions of drug user to their personal will usually defend on the drug use. Personal drug use is significantly associated with performance self-esteem and a positive influence on most aspects of drug use. Individual social self-esteem has been empirically stated to be effectively associated with personal drug use.

On the other hand, the relationship between emotional intelligence and personal drug use among drug user signified that self-awareness provide high level on personal drug use. The overall results on the correlations between indicators of emotional intelligence in terms of self-awareness, emotional regulation, self-motivation, social awareness, social skills and receptivity are high level.

The findings support the theory of Vanderbilt-Adriance et, al (2015). In the study conducted on conduct problems (CP), such as violence, robbery or fire-setting, are one high-impact negative outcome that places a great burden on society, requiring services from school, mental health centers and judiciary. Conduct problem identified as early as age 3 have been found to be associated with more serious forms of antisocial behaviour in adolescence and adulthood. Further other evidence shows that rigorous parenting strategies such as parental preferences and proactive attempts to have present, accurate understanding of where teenagers are preventive against eventual adolescent involvement in violence and associated problem behaviours. (Simons-Morton, et, al 2014).

➤ *Regression Analysis on the Influence of State Self-Esteem, Emotional Intelligence and Aggression to Personal Drug Use.*

The significance on the influence of the variables to personal drug use disclosed that state self-esteem particularly on the performance self-esteem, social self-esteem and appearance self-esteem influences personal drug use. On the other hand, emotional intelligence is a good predictor of personal drug use specifically on self-awareness, emotional regulation, self-motivation, social awareness, social skills and receptivity. Evidently, the findings support the conceptual analysis of WU et al (2014) which stated that teenagers with low self-esteem involved in drug use as a means of coping with emotions and avoid stress and anxiety.

Individual social self-esteem has been empirically stated to be positively connected with personal drug use. In the same vein the study supports the pronouncement of Mayer, et, al (2016) which stated that emotion has shown the significance of emotional regulation in adaption, perceptual, well-being, exposure and socialization.

Certainly, results of this study advocate the theory of Hartman (2017) that individual emotional deregulation can weaken judgment-making mechanisms, cause anxiety and result in a lack of social proficiency and lead to personal drug use. This is essential as it evaluates the function of self-confidence in the content of user behaviour that molds personal drug use.

➤ *Best Fit Model for Personal Drug Use*

The analysis on the interrelationships among state self-esteem, emotional intelligence and aggression to personal drug use among substances user consisted of four alternative models. They were tested to achieve the best fit model of personal drug use among substances user. Every model has a structure which could be broken down into two sub models which are measurement model and structural model. That measurement model depicts the measure weights across each element to their endogenous structures whereas the structural model determines the connections amongst the latent factors. Moreover, the assessment of fit was used as the baseline for accepting and rejecting the model. Based on the findings, the model evidently illuminates the essentials of state self-esteem and emotional intelligence as predictors of personal drug use, state self-esteem and emotional intelligence are important components of personal drug use to appropriately manage personally to cope with feelings and escape from stressor.

Hence, the findings highlighted that personal drug use among drug user to succeed must be anchored on state self-esteem particularly on performance self-esteem, social self-esteem and appearance self-esteem. Likewise, critical consideration on the inclusion of emotional intelligence is necessary to meet the guarantee of personal drug use collaborative self-awareness, emotional regulation, self-motivation, social awareness, social skills and receptivity.

The generated model 4 supports the articulation of Denham (2007) which stated that emotional regulation, the individual's assertions of emotion to the child are essential since many emotion management techniques are emotions-specific (e.g., controlling rage by modifying or rerouting goals; controlling sorrow by creating emotional assistance; handling fear by abandoning the circumstance). If a parent understands a child as mad when the child is rather happy or unhappy, than it is possible that the parent would encourage an unacceptable or unrelated emotion. Therefore it indicates that parents are faced with a bigger challenge than often believed in promoting the advancement of proficient emotional regulation abilities in younger children because the complexity of analysing the child's feelings in an actual situation. Individual emotion has been empirically found to be positively associated with personal drug use.

Apparently, the best fit model of personal drug use support the articulation of Grandfield and Cloud (2014) which stated in particular, that there has been an interest in social capital as a means to "natural recovery" or "natural cessation," the process by which individuals quit their substance use without treatment.

VI. CONCLUSION

Conclusive statements were drawn on the basis of the research. The level of state self-esteem is high with overall rating of 3.44 and standard deviation of 0.53 which observed that adults dealing with substance abuse had lower levels of self-esteem than adults who did not have issues with drug abuse. Some study supports these causal links. The feelings of nearness in the parent-adolescent connection are attributed to the parents' perceptions of their parenting as acceptable to them and the self-esteem of the adolescents and their involvement in family time (Gupta and Sharma 2016).

The level of emotional intelligence is high including the indicators with high level, collaborative social skills and self-motivation collaboration respectively ranges 3.66 or high with standard deviation of 0.46 means that emotional intelligence does not concentrate solely on variations in emotional responses but takes into consideration aspects like how a person manages emotions when they are enabled (Paulson, Hill, & Holmbeck, 1991).

The level of aggression is moderate with overall ratings of 3.08 and 0.76 standard deviation that anchored to aggression either been used to ameliorate uncomfortable emotional states or have been implicated in the precipitation of aggression. Not only do many of the mood altering substances impair perception but also there is proof that drugs use through their ability to alter neurotransmitter levels alters mood state. (Nuckols, C. C., 2018).

Moreover, state self-esteem, emotional intelligence and aggression are predictor of personal drug use. Furthermore, generated model 4 fits personal drug use. This means that the causes of personal drug use lean on the emotional intelligence and aggression which stimulated by

young and adult users. In addition, personal drug use is best anchored state self-esteem and emotional intelligence which signifying that the extent of state self-esteem and emotional intelligence could mean high level factor or contributor of personal drug use.

RECOMMENDATION

The result and findings that state self-esteem and emotional intelligence are predictors of personal drug use, consisted of four alternative models. They were tested to achieve the best fit model of personal drug use among substances user. Every model has a structure which could be broken down into two sub models which are measurement model and structural model. That measurement model depicts the measure weights across each element to their endogenous structures whereas the structural model determines the connections among the latent factors.

Moreover, the assessment of fit was used as the baseline for accepting and rejecting the model. Based on the findings, the model evidently illuminates the essentials of state self-esteem and emotional intelligence as predictors of personal drug use. State self-esteem and emotional intelligence are important components of personal drug use to appropriately manage personally to cope with feelings and escape from stressor. Hence, the findings highlighted that personal drug use among substance user to succeed must be anchored on state self-esteem particularly on performance self-esteem, social self-esteem and appearance self-esteem.

Likewise, critical consideration on the inclusion of emotional intelligence is necessary to meet the guarantee of personal drug use collaborative self-awareness, emotional regulation, self – motivation, social awareness, social skills and receptivity. Additionally, future researchers wish to utilize questionnaire in the present study may consider validating the use of the tool exploratory factor analysis (EFA) or confirmatory factor analysis (CFA).

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