

## ENLIGHTENMENT THROUGH MINDFULNESS: TERMINATION OF DEPRESSION AMONG DRUG ADDICTS\*\*\*\*\*

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### ABSTRACT

*Medicine is not only the cure of any illness other factors like paying attention on purpose (mindfulness) also play a vital role in the termination of physical and psychological illness. Present study was aimed to explore the relationship between mindfulness and depression among drug addicts. Randomly selected sample of 60 drug addicts was taken from Nai Zindagi Hospital, Multan and Nishtar Hospital Multan. The Mindfulness Attention Awareness Sacle (Brown & Ryan, 2003) and Beck Depression Inventory (Beck, 1987) were used. Results indicated a significant negative relationship between mindfulness and depression. These results depicted that as mindfulness in drug addicts will increase depression will terminate as well. The findings showed that married and single drug addicts have significance difference on the level of mindfulness but no difference on the level of depression. The findings pertaining to educational differences showed that educated and uneducated drugs addicts have no significance differences on the level of mindfulness and depression.*

**Keywords:** mindfulness, depression, termination, drug addicts

### INTRODUCTION

Mindfulness is a spiritual faculty that is considered to be of great importance in the path to enlightenment according to the teaching of the Buddha. It is one of the seven factors of enlightenment. "Correct" or "right" mindfulness is the seventh element of the noble eightfold path. Enlightenment is a state of being in which delusion has been overcome, abandoned and is absent from the mind. Mindfulness, which is an attentive awareness of the reality of things (especially of the present moment) is an antidote to delusion and is considered as such a power. This faculty becomes a power in particular when it is coupled with clear comprehension of whatever is taking place.

Jon Kabat-Zinn, (2003) defines Mindfulness as the awareness and concentration of purpose, in the present moment, and non-judgmentally to the unfolding of experience. Mindfulness refers to the awareness of one's present moment. Individuals who are experiential rather than analytical thinkers are more aware of their present surroundings and their psychological state. That is, mindfulness refers to sustained or frequent awareness and attention to current and ongoing experiences. Hence, mindfulness departs from other forms of awareness, such as rumination, self monitoring, and cognition, all of which are characterized by analytical, logical, rational forms of processing information (Brown & Ryan, 2003). That is, unlike these other forms of awareness, mindfulness does not involve cognitive reflection and analysis.

Three interrelated constituents of mindfulness were defined (Germer, 2005). First, mindfulness bases on the sense of awareness. Secondly, this awareness is directed to ongoing

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experiences of the person. In fact mindfulness gives the awareness of present experiences and environment and does not divert attention to past events or future possibilities. Third, this awareness of ongoing experience does not involve any judgment, evaluation, and even elaboration Kabat-Zinn, (1994). That is, their thoughts, feelings, sensations, and urges are all accepted rather than judged. The term mindfulness is very diverse in nature, sometimes mindfulness is a description of mind state characterized as a sense of uncritical awareness of current situation, it's an intervention, usually involving meditation, finally mindfulness can be conceptualized as a mental process, rather than as a state, underpinning self regulation (Brown & Ryan, 2003).

Perls (1973) gestalt psychologist concluded that individuals form alienated, neglected, or biased memories of experience transform their life experiences into perception which can be integrated into the self and promote well being of the person. Mindfulness Based Stress Reduction therapy is also an effective clinical instrument to cure depression and behavioral deficits (Kabat-Zinn, 1982). New researches revealed that Individuals who reported a mindfull disposition are less likely to exhibit pathological disturbances because they do not overestimate themselves (Lakey, Campbell, Brown, & Goodie, 2007). Mindfulness-based cognitive therapy (MBCT) is psychological therapy which blends features of cognitive therapy with mindfulness and Mindfulness Base Stress Reduction are frequently in use to help people with relief anxiety, stress, depression, chronic pain, and other conditions.

### **Depression**

State of apprehension refers to depression. Beck (1969) argued that depression was instituted by one's view of oneself, instead of one having a negative view of oneself due to depression. Research backed up Beck's theory and found that student's negative views about their future strongly controlled the interaction between dysfunctional attitudes and the increase in depressed mood (Abela and D'Alessandro's, 2002).

Sato and McCann's (2000) study was also performed on Beck's Theory and results of the study showed that the independence did not correlate with depression, and the sociotropy, not autonomy was a precursor of depression. This support for cognitively caused depression is an interesting use of Beck's Theory.

Drug addiction (Dennis Donovan, 1988) a drug (especially a narcotic drug) that produces numbers or stupor; often taken for pleasure or to reduce pain; extensive use can lead to addiction, habituation, dependency, abnormally tolerant to something that is psychologically or physically habit – forming alcohol addictions, alcoholism, inebriation, habitual intoxication, prolonged and excessive intake of alcoholic drinks. There are many types of drugs one can become addicted to and the effects are varying, following are the most common types of drug addictions; Alcohol Nicotine, Cocaine, Opiate, Heroin, Marijuana, and Caffeine. Like many psychological disorders, drug addiction and dependence depends on several things. Two main factors include: Environment and Genes.

### **Environment**

Environmental factors including your family's beliefs and attitudes and exposure to a peer group that encourages drug use seem to play a role in initial drug use.

### **Genes**

Once you've started using a drug, the development into addiction may be influenced by inherited traits. Addicting drug causes physical changes to some nerve cells (neurons) in brain which is a major cause of physical illness.

A growing body of research suggests that mindfulness-based therapies may be effective in treating a variety of disorders including stress, chronic pain, depression and anxiety. (Leigh, Bowen, & Marlatt, 2005).

This number would be even greater if Alcohol and Charas were included in the survey. (Moghni and Ansari, 1979) in their join study, conducted for PNCB, reported that 35 percent of the student populations in Peshawar University hostels were drug abusers. These studies were however, not representative in that they cover a small area (Peshawar University Campus), and a very selective group of (all educated) respondents.

Mindfulness is positively related to subjective well being, life satisfaction, and self esteem, as well as inversely related to depression and anxiety Brown & Ryan, (2003). These relationships tend to persist even after emotional intelligence, private self consciousness, neuroticism, and extra version are controlled.

A variety of studies have shown that attempts to instill mindfulness can alleviate mood disorders. That is, interventions that introduce or entail mindfulness have been shown to ameliorate symptoms of anxiety Evans, Ferrando, Findler, Stowell, Smart, & Haglin, (2008), zrauma Follette, Palm, & Pearson, (2006) as well as depression (Kingston, Dooley, Bates, Lawlor, & Malone, (2007).

The present study was aim to determine relational aspects of mindfulness and depression among drug addicts. Mindfulness and depression are important concepts in understanding the drug addictive behavior. When addicts are in state of mindfulness or in depression then they use drug to release the depression. Most of the previous researches on the mindfulness and depression among drug addicts had been conducted in western culture. The present research would be helpful in determining the relational aspects of mindfulness and depression among drug addicts in Pakistan especially in Multan. The findings of present study would be helpful in order to treat the depressive and drug addicts as well in clinical settings

## OBJECTIVES

1. To investigate the co relational aspects of mindfulness and depression among drug addicts.
2. To investigates mindfulness and depression among single and married drug addicts.
3. To investigates mindfulness and depression among educated and uneducated drug addicts.

## HYPOTHESES

1. Mindfulness and depression will negatively correlate among drug addicts.
2. Mindfulness and depression will be high among married drug addicts than single drug addicts.
3. Mindfulness and depression will be high among educated drug addicts than uneducated drug addicts.

## METHOD

### Participant

The sample would be consisted of 60 people and conducted from Nai Zindagi Hospital Multan, Nijat Centre Multan, Nishtar Hospital Multan. Participants were taken through simple random sampling technique (probability sampling) had been used for the study. Those patients were included in the studies that were willing to participate in the study.

## Instruments

Two Instruments are used in the research.

- a. Mindfulness Attention Awareness Scale
- b. Beck Depression Inventory

### Mindfulness Attention Awareness Scale

Brown and Ryan (2003) developed and validated the Mindful Attention Awareness Scale, or MAAS, to measure individual differences in mindfulness. Urdu version was used in the study. To score the scale, compute a mean of the 15 items. Higher scores reflect higher levels of dispositional mindfulness.

### Beck Depression Inventory

Beck, Ward, Mendelson, introduced Beck Depression Inventory (1987).The Beck Depression inventory is a 21 items. Self-report questionnaire that assesses the presence and severity of cognitive, affective, motivational and physical symptoms of depression. Score range is from 0-63. Higher score indicates greater symptoms severity but are not necessarily synonymous with clinical diagnosis. The BDI is one of the most widely used instruments for the assessment of depression in clinical sample. It has been found to have adequate validity and reliability in repeated assessment across a wide variety of population (Beck, Steer &Garbin).

## Procedure

Data was collected through the use of a survey questionnaire, administered to addicts of different hospitals (NaiZindagi Hospital , Nijat Centre , Nishtar Hospital) Multan. Data was collected of different age groups (17 to 65). The questionnaire consisted of Urdu translated Mindfulness Attention Awareness Scale and Beck Depression Inventory in the booklet from along with consent form and demographic information. All the instructions were provided to the participant and complete information about the purpose of the research. Participants were urged to all the items honestly and were remind that answers would remain anonymous. SPSS (Statistical Package of Social Sciences) has been used for the analysis of data collected from the drug addicts.

## RESULTS

**Table 1. Correlations matrixes of mindfulness and depression among drug addicts**

<i>Scale</i>	<i>Mindfulness</i>	<i>Depression</i>
Mindfulness	1*	-.289*
Depression		1

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

Table 1 show significant negative correlation of mindfulness and depression. Values indicate that mindfulness and depression are negative correlate to each other. It depicts that as mindfulness in drug addicts will increase depression will decrease.

**Table 2. Mean, Standard deviation, and t value for the score of mindfulness among married and single drug addicts (n=60)**

<i>Marital Status</i>	<i>N</i>	<i>Mean</i>	<i>S.D</i>	<i>t</i>	<i>p</i>
Married	40	4.4218	.72959	2.079	.042
Single	20	3.6955	.93162		

df = 58,  $p < 0.05$

Table 2 indicates that P value is very less than 0.05 and indicates the difference in the level of mindfulness among married and single drug addicts. Results indicate weak difference among married and single drug addicts. It accept hypothesis.

**Table 3. Mean, Standard deviation, and t value for the score of depression among married and single drug addicts (n=60)**

<i>Marital Status</i>	<i>N</i>	<i>Mean</i>	<i>S.D</i>	<i>t</i>	<i>P</i>
Married	40	18.65	10.136	-.897	.373
Single	20	21.35	12.567		

df = 58,  $p > 0.05$  n.s.

P value is greater than 0.05 and this table indicate that no difference in the level of depression among married and single drug addicts. It shows that hypothesis is rejected.

**Table 4. Mean, Standard deviation, and t value for the score of mindfulness among educated and uneducated drug addicts (n=60)**

<i>Educational Status</i>	<i>N</i>	<i>Mean</i>	<i>S.D</i>	<i>t</i>	<i>p</i>
Educated	28	4.2221	.83290	.234	.816
Uneducated	32	4.2741	.87850		

df = 58,  $p > 0.05$  n.s.

Table no 4 indicate that P value is high to 0.05 and indicate that no difference in the level of Mindfulness among educated and uneducated drug addicts. It rejects the hypothesis.

**Table 5. Mean, Standard deviation, and t value for the score of depression among educated and uneducated drug addicts (n=60)**

<i>Educational Status</i>	<i>N</i>	<i>Mean</i>	<i>S.D</i>	<i>t</i>	<i>p</i>
Educated	28	20.82	.9287	-.837	.408
Uneducated	32	18.82	12.687		

df = 58,  $p > 0.05$  n.s.

Table no 5 indicate that P value is greater than 0.05 and indicate that no difference in the level of depression among uneducated and educated drug addicts. It rejects the hypothesis.

## DISCUSSION

The study was conducted to find mindfulness and depression among drug addicts. First of all, make hypothesis for our research. Administered to drug addicts of different hospitals Nai Zindagi Hospital, Nijat Centre, Nishtar Hospital Multan. Data was collected of different age groups 17years to 65 years. We use 2 scales in our research Mindfulness Attention Awareness Scale and Beck Depression Inventory Scale both are valid scales.

The first hypothesis of the study was that “Mindfulness and depression are negatively correlated among drug addicts”. Our findings also showed that significant negative correlation of mindfulness and depression. Mindfulness in drug addicts will increase depression will decrease. Its supports our hypothesis.

The second hypothesis of the present study was that “Mindfulness is higher among married drug addicts than single drug addicts”. Our findings showed that difference of mindfulness among married and single drug addicts that’s why second hypothesis of this research is also supported. Married people have more responsibilities because they have family and all the family depends on them. That’s why married drug addicts are highly mindfulness than single drug addicts.

Third hypothesis of the study was that “Depression is higher among married drug addicts than single drug addicts”. Findings of this research showed that no significant difference between married and single drug addicts we cannot say that depression level is high in married drug addicts as compare to single drug addicts. Findings indicate that level of depression is equal in married drug addicts and single drug addicts.

The fourth hypothesis of the present study was that “Mindfulness is higher among educated drug addicts than uneducated drug addicts”. Our results showed that there is no difference between mindfulness and education. Mindfulness is mostly equal in educated and uneducated drug addicts. Results of this research is rejected the fourth hypothesis of this research.

Fifth and last hypothesis of this study was that “Depression is higher among uneducated drug addicts than educated drug addicts”. Results of the present study were also rejected fourth hypothesis of the research because results indicate that no difference in the level of depression among educated and uneducated drug addicts. It depicts that education is not affected on depression. Educated and uneducated drug addicts have feelings and emotions that's why they can be depressed mood. Findings of recent research is rejected this hypothesis.

## CONCLUSION

The present study explored enlightenment through Mindfulness; termination of depression among drug addicts. Findings of the study represented that significant negative correlation of mindfulness and depression. Mindfulness in drug addicts will increase depression will decrease, mindfulness is higher among married drug addicts than single drug addicts, depression level is same in married drug addicts and single drug addicts, our results showed that there is no difference between mindfulness and education. Mindfulness is mostly equal in educated and uneducated drug addicts, and our research findings showed that education is not affected on depression. In past therapist used cognitive behavioral therapy (CBT) to reduce depression but now we can use mindfulness therapies mindfulness based cognitive therapy (MBCT) and mindfulness based stress reduction (MBSR) to reduce and terminate depression among drug addicts. Mindfulness Therapy is a very powerful and effective method for healing anxiety, depression and stress.

## LIMITATIONS

Various limitations may exist in this study.

1. The sample of the research was very small, only sixty drug addicts and might not represent the majority of the drug addicts of the intermediate level.
2. Sample composition, which is one of the most frequently cited threats to external validity.
3. Study was conducted only from different hospitals of Multan. So, the present study is not generalized on overall Pakistan.
4. Study was conducted only on drug addicts.

## SUGGESTIONS

Some suggestions for better research in future:

1. The sample size should be large for better results and generalization.
2. Data should have been collected from many hospitals in Pakistan.
3. More demographic variables would be including for getting better results.
4. Researches should be conducted in vast area of population.
5. Further researches should be used to find out cause and effect between mindfulness and depression among drug addicts.

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