



RESEARCH PAPER

Personality Type's Relationship with Psychological Characteristics of Psychotic Patients

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ABSTRACT

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The purpose of this study was to examine the relationship between personality type and psychological traits in both psychotic and non-psychotic individuals. For the purpose of gathering the necessary data from patients, both psychotic and non-psychotic, intentionally (N=50) volunteers were contacted. Ten distinct TAT cards were chosen to serve as a measuring scale. The same participant's personality inventory was used in conjunction with TAT to objectively assess the participant's personality traits. To measure the needed subject matter objectively, the cross-sectional research design of the current study was used. Internal consistency, intercorrelation, t-test, and ANOVA were employed for the statistical analysis. Results indicated that there is no statistically significant difference between male and female personality types on the personality inventory ($p > 0.05$). Only two of the personality scale's domains – conscientiousness and emotional stability – showed a gender difference. The results showed that there was no significant difference between personality types and educational status. Additionally, there was no significant difference between psychotic and non-psychotic personality types and psychological traits in terms of residential status and socioeconomic status. According to TAT findings, schizophrenic individuals were less emotionally stable, open-minded, and conscientious and more neurotic, introverted, and neurotic. The association between personality types and psychotic condition has been found to be robust, even though there was a strong correlation between personality types, psychotics, and non-psychotics.

Introduction

Personality is a manner of thinking, feeling, and doing that distinguishes oneself from others. Individual distinctions in personality types predict psychological qualities of an individual. Every personality type has a varied risk of developing psychosis. The purpose of this study is to determine which psychotic

patients have specific personality types and which psychotic patients have more psychotic symptoms. To get a better understanding of which psychological features are shared by various psychotic types.

Personality

A person's personality is defined as a consistent, organized set of psychological traits and mechanisms that influence how they interact with and transform their psychological, social, and physical environments (Larsen & Buss, 2018). A person's personality is the dynamic configuration of the psychophysical systems that control his or her traits, behaviors, and thoughts (Allport, 1961).

The Latin word "persona," which translates to "mask," is where the word "personality" originates. Hippocrates, an ancient Greek physician, is credited with introducing the concept of personality as a field of study. Hippocrates suggested that personality traits and human behaviour are based on four different temperaments connected to four body fluids known as "humours." Yellow bile, black bile, phlegm, and blood, according to humorists, correspond to four different dispositions, and their balance determines a person's personality (grumpy, melancholy, calm, and cheer, respectively). Although this notion is no longer held, it did open the door for further investigation and comprehension of human psychology (Holzman, 1991).

Psychosis

According to Timothy (2018), psychosis is defined by a skewed perception of reality. It serves as a warning sign for more severe mental diseases. Hallucinations or delusions are common in psychotic patients. Patients who have been classified as being at the psychotic level may be actively psychotic as shown by hallucinations, overtly delusional thinking, and/or other psychotic symptoms like catatonia and hebephrenic; however, psychosis may not be immediately apparent as in the absence of hallucinations, overtly delusional thinking, and/or other psychotic symptoms like catatonia and hebephrenic (McWilliams, 1994).

Temperament and Character

According to Watson et al. (2006), temperament and character are the two classic subtypes of personality. Character refers to individual differences coming from socialization, whereas temperament refers to biologically grounded, early-emerging, stable individual distinctions in emotion and control. The differences between these groups, however, are disputed because a large body of evidence indicates that personality traits share all of the characteristics of temperament, such as solid genetic and biological roots and long-term stability.

The first ten cards of the Thematic Apperception Test were used in a study by Leitch and Schafer (1947) that compared the formal qualities of the works produced by a group of fifteen psychotic and fifteen maladjusted non-psychotic youngsters. With my exception, the psychotic group was made up of a succession of kids seen at the Southard School or the Menninger Clinic's outpatient division. Children chosen to match the ages of the psychotic children were seen in the non-psychotic group in the same facilities throughout the same time period. In the psychotic group, there were two girls and thirteen boys, while in the non-psychotic

group, there were nine girls and six guys. Only eight of the psychotic kids had a firm diagnosis of schizophrenia despite the fact that several of them had schizophrenic-like symptoms. The kids' ages ranged from 5 to 17, with an average age of 11 for each group. Nine psychotic records and six non-psychotic recordings included overly specific utterances in groups. However, only one such indicator per record was discovered in non-psychotic individuals, compared to an average of two per record in the psychotic group. This was revealed by the Chi test to be a potentially significant trend in the psychotic group. This was revealed by the Chi test to be a potentially significant trend in the psychotic group. Both groups' stories appeared to cover a similar emotional gamut, with the psychotic group expressing the same number and variety of feelings as the non-psychotic group, including grief, happiness, wrath, envy, worry, etc. When the stories from the Thematic Apperception Test of fifteen maladjusted non-psychotic children and fifteen psychotic children were analyzed, it became clear that the former group had disruptions in mental organization, emotion, and perception that set them apart from the non-psychotic group.

Personality In Relation To Psychotic Symptoms

Little is known about personality, particularly how it relates to psychotic symptoms in recently developed psychosis, claim Jones et al. (2017) (ROP). In addition to examining the effects of symptoms, sex, and age on clinically significant personality qualities, the goals of this study were to look at the links between clinical symptoms and dimensional and categorical personality traits. The data for these analyses came from 94 ROP patients. The Millon Clinical Multi-axial Inventory and the Positive and Negative Syndrome Scale were used to assess both personality and symptoms. After correlation analysis and the Mann-Whitney test, logistic regression was completed. Higher levels of the negative dimension were seen in patients with schizoid characteristics. The enthusiastic dimension was lower in people who had avoidant and depressed inclinations. Age, the component of anxiety and melancholy, and 31.3 percent of the dependent trait were all used to explain the dimension of anxiety and despair. Gender was found to account for 14.5 percent of the histrionic trait, 11.6 percent of the paranoid trait, and 14.5 percent of the narcissistic trait. Finally, gender and positive dimension accounted for 16.1 percent of the obsessive trait. The study underscores how important it is to look at personality in patients with psychosis because it helps us understand the patients and the symptoms they go through more deeply.

Recent studies on the prevalence of psychotic experiences in both the general population and those with personality disorders were examined by Balaratnasingam et al. (2015). Up to 15% of persons in the general population claim to have experienced psychosis in some way. Most of these folks are functioning properly, don't need psychiatric care, and haven't been given a psychotic disorder diagnosis. Between 25 and 50 percent of persons with borderline personality disorder also exhibit psychotic symptoms. These are not always transient and cannot always be distinguished from psychotic symptoms experienced by patients with schizophrenia. But according to recent studies, those who have schizotypal personality disorder are dimensionally linked to those who have schizophrenia and are more likely to have psychosis. But according to recent studies, those who have schizotypal personality disorder are dimensionally linked to those who have schizophrenia and are more likely to have psychosis. The best way to conceptualize psychotic symptoms is as "trans-diagnostic" entities that fall on a scale from normal

to abnormal. A sizable amount of research supports the dimensional connection between schizophrenia and schizotypal personality disorder. According to a significant body of research, psychotic symptoms in borderline personality disorder are frequent, persistent, and used as a gauge of the severity of the condition. This review underlines the significance of going beyond preconceived notions and categorical limits when looking at psychotic experiences and psychopathological events.

Material and Methods

Mixed research method (Quantitative and Qualitative) method was used to assess personality type's relationship with psychological characteristics of psychotic patients. Cross sectional and GTM (Grounded Theory Method) was used as a research design. Target population of the current research was psychotic patients and normal people. The data was collected from different hospitals which include, City Medical Center Haripur, DHQ Hospital Haripur, Aaghaz Psychological Association Abbottabad and Abbottabad Medical Complex. In current research two instruments were used i-e; Thematic Apperception Test (TAT) and Ten Item Personality Inventory (TIPI)

Results and Discussion

Table 1
Mean, standard deviation and t-value of Ten Item Personality Inventory on gender (N=50)

Factors	Male (n=25)		Female (n=25)		t	p	Cohen's d
	M	SD	M	SD			
E	4.78	3.17	5.22	3.08	-.49	1.34	0.14
A	6.80	3.02	5.90	2.51	1.44	.00	0.34
C	6.14	3.26	6.60	2.49	-.56	.00	0.15
ES	3.27	2.65	2.80	1.29	1.55	.72	0.44
OE	3.80	2.48	3.49	2.39	-.52	.63	0.12

Note: E=extraversion, A=agreeableness, C=conscientiousness, OE=openness to experience, ES=Emotional Stability M=Mean, SD=Standard Deviation, $p>0.05$

Table I indicates that males and females showed no significant difference on personality inventory on all five domains of personality inventory as ($p = >0.05$). Male and female were found to be different on just two domains i-e; agreeableness and conscientiousness. Male and female scored high on agreeableness ($M=6.80$, $p>0.05$), ($M=5.90$, $p>0.05$) and conscientiousness ($M=6.14$, $p>0.05$), ($M=6.60$, $p>0.05$) respectively.

Table 2
One way variance of Qualification and Ten Item Personality Inventory (N=50)
Qualification

Subscale	Middle		Matric		FA		MA		MSC		F	P
	M	SD	M	SD	M	SD	M	SD	M	SD		
E	5.25	4.10	5.50	3.46	4.81	3.02	5.00	2.96	3.83	2.18	.30	.87
A	6.33	3.80	6.39	3.34	4.75	1.81	6.66	2.44	7.58	2.01	1.00	.41
C	6.33	3.75	6.61	3.05	4.88	2.57	6.97	2.79	6.25	2.36	.72	.58
ES	4.25	3.51	3.96	2.66	3.88	2.46	4.03	2.24	2.83	1.21	.31	.86

OE	2.50	1.22	2.86	1.66	3.00	1.30	3.57	2.48	4.00	2.42	.73	.57
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Note: E=extraversion, A=agreeableness, C=conscientiousness, OE=openness to experience, ES=Emotional Stability, $p > 0.05$

Table II shows findings of the above table indicated that no significant difference was found between educational status and types of personality. Participants from all educational background found to same on psychotic disorder. Participants from MSC scored highest on agreeableness ($M=7.58, p>0.05$) as compare to participants from MA ($M=6.66, p>0.05$), Matric ($M=6.39, p>0.05$), Middle ($M=6.33, p>0.05$), and FA ($M=4.75, p>0.05$) respectively. The highest score was on agreeableness ($M=7.58, p>0.05$) and the lowest score was on openness to experience ($M=2.50, p>0.05$).

Table 3
One way analysis variance of Socio economic status and Ten Item Personality Inventory (N=50)

Subscales	Socio economic status							
	Upper		Middle		Lower		F	p
	M	SD	M	SD	M	SD		
E	7.25	2.65	4.85	2.89	3.68	3.08	4.48	.01
A	8.00	1.63	5.92	2.69	5.96	3.30	2.30	.11
C	8.60	1.10	6.02	2.82	5.43	3.18	4.49	.01
ES	4.60	2.76	4.21	2.34	2.71	2.03	2.44	.09
OE	4.70	2.62	3.31	2.07	2.14	.92	4.95	.01

Note: E=extraversion, A=agreeableness, C=conscientiousness, OE=openness to experience, ES=Emotional Stability, $p<0.05$, M= Mean, SD= Stander Deviation

Table III shows findings of the above table there is no statistically significant difference between socio-economic status and types of personality agreeableness, and emotional stability as the ($p = >0.05$).But extroversion, openness to experience and consciousness have significant difference SES wise as the $p<0.05$. The upper class scored high on agreeableness ($M=8.00, p<0.05$) and conscientious ($M=8.60, p<0.05$) as compare to middle ($M=5.92, p<0.05$), ($M=6.02, p<0.05$) and lower class ($M=5.96, p<0.05$), ($M=5.43, p<0.05$) respectively. While upper class scored moderately on emotional stability ($M=4.60, p<0.05$) and openness to experience ($M=4.70, p<0.05$) as compare to middle ($M=4.21, p<0.05$), ($M=3.31, p<0.05$) and lower class ($M=2.71, p<0.05$), ($M=2.14, p<0.05$). In other words participants from all socio-economic status are equally vulnerable towards psychotic disorders.

Table 4
One way analysis variance of Residence and Personality Inventory (N=50)

Subscales	Residence						F	p
	Urban		Suburban		Rural			
	M	SD	M	SD	M	SD		
E	5.45	3.21	3.10	2.53	4.78	2.97	1.29	.28
A	6.36	2.70	4.00	2.87	7.06	2.67	2.43	.09
C	6.71	2.91	4.30	3.03	6.41	2.67	1.52	.22
ES	4.02	2.52	2.50	2.23	4.03	2.27	.88	.41
OE	3.45	2.37	2.20	1.09	3.25	1.83	.73	.48

Note: E=extraversion, A=agreeableness, C=conscientiousness, OE=openness to experience, ES=Emotional Stability, $p>0.05$

Table IV shows the results of the above table indicated that no significant statistical difference exist between residential status and types of personality as the p value is >0.05 . Participants belonging to rural area scored high on agreeableness ($M=7.06$, $p>0.05$) as compare to urban ($M=6.36$, $p>0.05$), and suburban area ($M=4.00$, $p>0.05$). Participants from all age group are equally vulnerable towards developing psychosis.

Qualitative Analysis

Table 5
Personality Traits among Psychotic and Non -Psychotic Patients (N=50)

Personality Traits	Psychotic	Non-psychotic
Introversion	High	Low
Extraversion	Low	High
Neuroticism	High	Low
Agreeableness	High	Low
Emotional Stability	Low	High
Open-mindedness	Low	High
Conscientiousness	Low	High

Table 5 shows personality characteristics of psychotic and non-psychotic patients analyzed through TAT. Results indicate that psychotic patients are more introverted, neurotic and agreeableness as compare to non-psychotic patients. Results also showed that psychotic patients possess less emotional stability, open-mindedness and conscientiousness.

Table 6
Psychological Characteristics According to Personality Types of Psychotic and Non-Patients (N=50)

	Personality Types			
	Introversion	Neuroticism	Agreeableness	
Psychotic	Depressed	Suicidal thoughts	Emotional instability	
	Social disapproval	Dissonance	Unhappy	
	Unrealistic	Conflict in ideal and Real self	Anxiety	
	Irrational thoughts	Unhappy	Pessimistic	
	Egoistic	Inadequate ego and Superego	Lazy	
	Individualistic	Negative parenting	Dependent	
		Self-harm	Unrealistic	
Non-Psychotic		Non beneficial		
		Maladjusted		
		Self-centered		

Table 6 is showing results for varying personality types among psychotic and non-psychotic patients. Results revealed that personality types of psychotic patients were introversion, neuroticism and agreeableness.

Discussion

The current study was carried out to investigate the relationship between Personality Types and Psychological Characteristics among Psychotic Patients. Cross-sectional survey research design was used to collect data from participants. The 50 participants have been recruited to find out the answer of the research question. To measure the personality characteristic the 10 item personality inventory was used. The psychometric properties of the scale were found to be acceptable. The internal consistency for all subscales of personality inventory was found to be .72 and above except one scale 0.61. The Pearson correlation depicted that the scale has significant positive correlation. A set of 6 hypotheses were tested in the given study. One way variance was implemented to find out the differences among demographic variables.

The first table proposed that there will be more likely difference in types of personalities in terms of gender among psychotic and non-psychotic patients; no statistically significant gender difference was found between gender and 3 types of personalities. Males and females were found different on only two scales which are conscientiousness and emotional stability. The research shows conflicting results and suggests that men and women have different personality traits in every area (Mattarozzi, Todorov, Marzocchi, Vicari, & Russo, 2015). Men are said to be more outgoing, emotionally stable, and receptive to new things (Weisberg, Deyoung & Hirsh, 2011). Females, on the other hand, are thought to be more amiable and introverted. In both individualistic and collectivistic cultures, there are varying degrees of gender personality difference. In contrast to collectivistic cultures like Pakistan, women in individualistic cultures are more self-assured and receptive to new experiences.

Second table represents that there will be difference in personality types in terms of qualification among psychotic and non-psychotic patients. Current study depicted no significant difference between qualification and types of personality. Literature claims that personality type and qualification have a high correlation. More emotionally stable were those with qualifications (Jonesab et al, 2017). Additionally, there was no statistically significant gender difference between the three personality types and gender. Only two scales—emotional stability and conscientiousness—were shown to be different between men and women.

Third table shows that psychotic and non-psychotic people possess different types of personalities in regard of socio economic status. According to the current study, there is no statistically significant difference between socioeconomic status and personality types such as agreeableness, emotional stability, and consciousness ($p > 0.05$), but there is a significant difference SES wise for extroversion, openness to experience, and consciousness ($p 0.05$). Contradictory research enrich the literature. Some research indicate that low socioeconomic position has an impact on people's

personalities (Walsh et al, 2013). Low socioeconomic class individuals frequently grow up with antisocial personalities, negative self-esteem, and low self-concept. Contrarily, those with higher socioeconomic standing have been found to be more likely to exhibit antisocial and narcissistic behavior (Cohen et al., 2008). There might be other reasons contradictory to literature that not only people belonging to lower socio economic status are more prone towards developing psychotic personality types but also people from middle and higher class are equally affected. It is not necessary that a person from high socio economic status have less chances of developing psychosis, it depends on the mental capacity of the individual and some people have these traits by birth.

4th table about residential area represents that psychotic and non-psychotic people will possess different types of personalities region wise. The results of the current investigation showed no discernible relationship between personality type and residential status. Literature refutes the study's conclusions and shows that residence status is the genuine indicator of personality type (Conger, Conger, & Martin, 2010). Those who live in metropolitan settings tend to have different personality traits from those who reside in rural places. People who reside in urban regions tend to be more introverted than those who live in suburban and rural locations.

According to qualitative investigation, psychotic individuals are more reclusive, neurotic, and pleasant than non-psychotic patients. Patients with psychosis tend to be more melancholy, socially unacceptable, unrealistic, egoistic, and individualistic. Additionally, studies have shown that patients with psychosis have the least interaction with reality (Monopoli & Alworth, 2000). They frequently overstate their own characteristics and are unable to accurately represent who they are.

The findings of a qualitative analysis also showed that neuroticism, agreeableness, and introversion were the predominant personality types among psychotic patients. Patients that are introverted tend to have personalities that are more depressive, unrealistic, egoistic, and individualistic. Suicidal thoughts, dissonance, confused identities, unhappy, ineffective ego and superego bad parenting, self-harm, maladjusted, and self-centered behaviours are more common among neurotic persons. People with an agreeable personality tend to be emotionally unstable, unpleasant, anxious, pessimistic, sluggish, dependent, and unrealistic.

Personality qualities like extraversion, openness to new things, emotional stability, and conscientiousness were present in non-psychotic individuals. More task-oriented, confident, upbeat, assertive, realistic, logical cognition, sufficient ego, and super ego were discovered in extroverts. The most well-known openness to experience personality traits were social acceptance, realism, task orientation, optimism, hard work, adaptation, adequacy in ego, and super ego.

Realistic, self-actualized, cheerful, and socially accepted were shown to be common traits among individuals with emotional stability personality types. Integrity, duty, loyalty, reason, punctuality, determination, assertiveness, and confidence were the traits of the conscientiousness personality that stood out the most.

A high correlation between personality type and psychotic disorder has been discovered through qualitative investigation, insofar as this association is concerned.

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