Data in Brief 35 (2021) 106890

Contents lists available at ScienceDirect

Data in Brief

journal homepage: www.elsevier.com/locate/dib

Data Article

Dataset relating self-control and hope among participants in Malaysian rehabilitation centers ☆

W.M.S. Wan Sulaiman, Z. Ismail, W.S. Wan Sulaiman*, R.M. Kawangit

National University of Malaysia, Malaysia

ARTICLE INFO

Article history:
Received 15 May 2020
Revised 13 February 2021
Accepted 15 February 2021
Available online 19 February 2021

Keywords:
Self-control
Hope
Drug addiction
Drug rehabilitation

ABSTRACT

Current research trends are moving towards acknowledging the significance and contributions of positive psychology in understanding the potential of individuals coping with problems. The shared data were used to explore the relations between self-control and hope among drug addicts in drug rehabilitation centers in Malaysia. Self-control was conceptualized by six dimensions: impulsivity, simple tasks, risk seeking, physical activities, self-centeredness, and temper. The measurement of hope included three dimensions: cognitive-temporal, affiliative-contextual, and affective-behavioral. A total of 244 clients from drug rehabilitation centers in Peninsular Malaysia were randomly selected to participate in the data collection. Significant correlations were observed between the self-control dimensions of impulsivity, simple tasks, self-centeredness and temper with hope. No significant correlation was observed between risk seeking or physical activities with hope. The data are useful in providing information towards developing treatment and rehabilitation programs for drug addicts. In general, the data showed the importance of incorporating self-control in rehabilitation modules to increase hope among drug addicts in their effort to combat drug addiction. The data can be used by

☆ Center for Research in Psychology and Human Well-Being, Faculty of Social Sciences & Humanities, National University of Malaysia.

* Corresponding author.
E-mail address: shara@ukm.edu.my (W.S. Wan Sulaiman).

https://doi.org/10.1016/j.dib.2021.106890

researchers and practitioners to further understand the role of positive psychology variables in developing and advancing current empirical understanding and knowledge about drug addiction.

Specifications Table

Subject	Psychology
Specific subject area	Substance Abuse Psychological Treatment
Type of data	Tables and Figure
How data were acquired	The analysis was based on dataset of correlation between self-control and hope among 244 samples. The questionnaire included demographic characteristics, the Self-Control Scale (SCS) and the Herth Hope Scale (HHS).
Data format	Raw Data
Parameters for data collection	A total of 244 samples were selected randomly from three drug rehabilitation centers under the control of the National Anti Drug Agency (NADA), Malaysia. The inclusion criteria for this data collection were clients who have undergone rehabilitation program for at least 3 months since their first admission, able to read and write on their own and had no prior diagnosis of physical or mental health problems.
Data description	Data were collected using the Self-Control Scale (SCS) and Herth Hope Scale (HHS). The questionnaire and its scoring is provided as a supplementary file.
Description of data collection	The data was collected using a set of questionnaire. Data collection was conducted for a total period of three days, starting from 14th to 17th of January 2019. Respondents were gathered at a public hall to be given brief explanation of the objectives and instructions of the survey. After providing informed consent, questions were read to them and explained.
Data source location	Three drug rehabilitation centers in Peninsular Malaysia were involved. These rehabilitation centers have met the inclusion criteria of the data samples, since these centers apply the psychological module as part of the rehabilitation program.
Data accessibility	The raw data files are available at: Questionnaire: https://data.mendeley.com/datasets/tr54dbcxzc/1 Raw data: https://data.mendeley.com/datasets/t3vpkrnsrg/1 All other data is attached with this article.

Value of the Data

- This dataset can be useful for researchers and practitioners in developing treatment and rehabilitation programs for drug addiction.
- These data can be used for further development of evidence-based psychological treatments using positive psychology, which is supported by several studies of drug addiction in Malaysia [1,2].
- The data in this article shows the importance of including self-control and hope in combating drug addiction.

1. Data Description

Out of 244 participants, all respondents were males. In regards to age, 32.80% of the participants were under 30 years of age, 43% between 31 and 40 years of age, 20.5% between 41 and 50 years, and 3.7% over the age of 51. About 61.5% were single and 24.2% were married,

Table 1
Demographic data.

Demographic		(N:244)	Percent (%)
Age	21–30 years	80	32.80
	31–40 years	105	43.00
	41–50 years	50	20.50
	51–60 years	9	3.70
Status	Single	150	61.50
	Married	59	24.20
	Widowed/Divorced	35	14.30
Previous Occupation	Unemployed	11	4.50
	Self-employed	185	75.80
	Government servant	9	3.70
	Private sector employed	39	16.00
Education level	Primary school	51	20.90
	High school	164	67.21
	Certificate/Diploma	29	11.89
Previous religious education	Yes	220	89.90
	No	24	10.10
Frequency of times in Rehab centre	1	169	69.30
	2	55	22.50
	3	16	6.60
	More than 3 times	4	1.60

Table 2
Self-control data descriptive ($N = 244$).

Dimension	N	Range of score	Mean	SD
Impulsivity	244	1.00–5.00	2.75	.43
Simple tasks	244	1.00–5.00	2.39	.49
Risk-seeking	244	1.00–5.00	2.60	.47
Physically active	244	1.00–5.00	2.19	.45
Self-centredness	244	1.00–5.00	2.93	.56
Temper	244	1.00–5.00	2.75	.53
Overall Self-Control	244	1.00–5.00	2.41	.23

while another 14.33% were widowed or divorced. Regarding respondents' previous occupation, 4.5% were unemployed, 75.8% were self-employed, 3.7% were government servants while 16% were employed in the private sector. The majority of the participants (67.21%) had a high school education, 20.9% had a primary school education and 11.89% had a diploma and skills certificate. The majority of the respondents (89.9%) had previous religious education while 10.1% had no previous religious education. The data also showed that 69.3% of respondents had been in the rehabilitation center once, 22.5% had been in the center twice, 6.6% had been in the center three times and 1.6% had undergone rehabilitation program more than three times. This showed that a total of 30.7% of the respondents were recidivists, meaning that they had repeatedly undergone drug rehabilitation programs but failed to leave their addiction. Table 1 presents the demographic data on participants.

Table 2 presents the means and standard deviations of respondents' self-control according to the six dimensions. Using a scale from 1–4 (where higher scores indicate more self-control), mean scores are reported for impulsivity (2.75), simple tasks (2.39), risk seeking (2.60), physical activities (2.19), self-centeredness (2.93), and temper (2.75). The mean score for overall self-control was 2.41.

Table 3 presents the means and standard deviations of respondents' hope according to the three dimensions. Using a scale from 0–3 (where higher scores indicate more hope), mean scores are reported for cognitive-temporal (2.20), affiliative-contextual (2.05), and affective-behavioral (2.17). The mean score for overall hope was 2.14.

Table 3
Hope data descriptive ($N = 244$).

Dimension	n	Range of score	Mean	SD
Cognitive-temporal	244	0.00–3.00	2.20	.44
Affiliative-contextual	244	0.00–3.00	2.05	.44
Affective-behavioral	244	0.00–3.00	2.17	.38
Overall Hope	244	0.00–3.00	2.14	.36

Table 4
Correlations between dimensions of self-control and hope.

Dimension	Hope
Impulsivity	.362**
Simple tasks	.208**
Risk seeking	.096
Physical activities	−0.090
Self-centredness	.219*
Temper	.257**

** $p < .0001$,.
* $p < .001$.

Table 4 presents the results of correlations between dimensions of self-control and hope. The findings showed that there were significant correlations between hope and impulsivity ($r = 0.362$, $p < .0001$), simple tasks ($r = 0.208$, $p < .0001$), self-centeredness ($r = 0.219$, $p < .001$) and temper ($r = 0.257$, $p < .0001$). However, no significant correlations were observed between hope and risk-seeking ($r = 0.096$, $p > .05$) and physical activities ($r = -0.090$, $p > .05$).

2. Experimental Design, Materials and Methods

A survey design was employed which involved respondents from three drug rehabilitation centers under the control of National Anti-Drug Agency (NADA), Malaysia. These centers are called Cure and Care Rehabilitation Centers (CCRC). A total of 244 participants were selected by random sampling according to these inclusion criteria:

1. Clients who have undergone a rehabilitation program for at least three months since their first admission.
2. Able to read and write on their own.
3. Had no prior diagnosis of physical or mental health problems.
4. The researchers obtained consent and cooperation for voluntary participation in the data collection.

Before data collection began, permission to conduct research at CCRC was obtained from the National Anti-Drug Agency of Malaysia. The locations for the data collection were selected due to the number of large population of clients in Peninsular Malaysia. A pilot data collection was first conducted among 30 clients to analyze the reliability of the Self-Control Scale and the Herth Hope Scale. The total of 30 clients from the pilot data collection was excluded from participating in the real data collection.

The actual data collection was conducted for a total period of three days, from the 14th to the 17th of January 2019. Respondents were gathered at a public hall to be given a brief explanation of the objectives and instructions of the survey. After providing informed consent, questions were read to them and explained. The process of reading of questions by the researcher and answering by respondents were done concurrently. Upon completion, all questionnaires were inspected to ensure all questions were answered properly. Respondents took between 30 and 60 min to complete answering all questions.

The first section of the questionnaire contained participant demographic data, including gender, age, marital status, previous employment, education level, previous religious education, and frequency of times entering rehabilitation centers.

The second part of the questionnaire was the Herth Hope Scale (HHS), developed by Herth [3]. Participants responded to these items using a four-point Likert-type scale (0=never applies to me, 1=seldom applies to me, 2=sometimes applies to me, 3=often applies to me). The HHS consists of 30 items measuring three dimensions (cognitive-temporal, affiliative-contextual, affective-behavioral). This instrument was reported to have good reliability and validity [4]. The questionnaire had been translated into Malay and back translated into English as suggested by Brislin [5] translation process. Based on a pilot data collection of 30 participants, the reliability of the questionnaire was α=0.839.

The third part of the questionnaire was The Self-Control Scale (SCS), which is a self-assessment tool to measure self-control. This questionnaire was developed by Grasmick, Tittle, Bursik and Arneklev [6], and contains 24 items. Participants responded to these items using a four-point Likert scale (1=strongly disagree, 2=disagree, 3=agree, 4=strongly agree). The scale has six dimensions: impulsivity, simple tasks, risk seeking, physical activities, self-centeredness and temper. All of the negative items were reverse coded (see the supplemental questionnaire for details) and higher scores indicated higher self-control. Numerous studies have demonstrated that the index is a valid and reliable measure [7–9]. To check the reliability of the questionnaires in the Malaysian context, the pilot data collection showed that the reliability of the scale was satisfactory (α=0.713).

After getting permission from the National Anti-Drug Agency of Malaysia, and attaining the consent from the respondents, the questionnaires were administered among the respondents in an appropriate place, and the purpose of collecting data was explained to them. All completed questionnaires were then entered into the Statistical Package for Social Sciences (SPSS) and the obtained data was analyzed.

All obtained data was confidential. Collected data was summarized using descriptive statistics, such as absolute (n) and relative (%) frequencies for categorical variables, and means and standard deviations (SD) of self-control and hope. Pearson correlations were used to test the relations between hope and the dimensions of self-control.

Ethics Statement

The researcher has obtained informed consent from the participants by asking them to sign an informed consent form. All participants were ensured of their anonymity as the questionnaire did not include participants' name and identity number. Ethical approval for this research was obtained from the National Anti-Drug Agency Ethics Committee with the reference number AADK 900–9/2 Jld. 2.

CRediT Author Statement

Contribution of each author is as following: **Wan Sulaiman, W. M. S.:** Conceptualization, Methodology, Formal Analysis, Reviewing & Editing; **Ismail, Z.:** Supervision, Conceptualization, Methodology; **Wan Sulaiman, W. S.:** Supervision, Writing - Original draft preparation, Methodology, Formal Analysis, Reviewing & Editing; **Kawangit, R. M.:** Supervision, Conceptualization, Methodology.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships which could have influenced the work reported in this article.

Acknowledgments

The authors would like to thank the National Anti Drug Agency for approving this research and the clients in Cure and Care Rehabilitation Centers (CCRC) who participated in the data collection.

References

[1] W.S.W. Sulaiman, F. Ibrahim, E. Zakaria, M.R. Kamaluddin, W.M. Sallam, E.M.E. Kamarudin, Development and psychometric properties of addiction recovery scale, Int. J. Psychosoc. Rehabil. 24 (4) (2020) 4551–4560, doi:10.37200/IJPR/V24I4/PR201557.

[2] E.M. Engku Kamarudin, W.S. Wan Sulaiman, N.H. Sarnon, A.S. Amin, Data on self-awareness, self-determination, and self-efficacy of opioid-dependent patients receiving methadone treatment before and after getting individual psycho-educational (i-SEAZ) intervention, Data Brief 30 (2020) 105586, doi:10.1016/j.dib.2020.105586.

[3] K. Herth, Development and refinement of an instrument to measure hope, Schol. Inq. Nurs. Prac. Int. J. 17 (1991) 1251–1259.

[4] C.R. Phillips-Salimi, J.E. Haase, E. Kintner, P.O. Monahan, Faouzi Azzouz, Psychometric properties of the Herth Hope index in adolescents and young adults with cancer, J. Nurs. Meas. 15 (1) (2007) 3–23, doi:10.1891/106137407780851769.

[5] R.W. Brislin, Back-translation for cross-cultural research, J. Cross Cult. Psychol. 1 (3) (1970) 185–216, doi:10.1177/135910457000100301.

[6] H.G. Grasmick, C. R.Tittle, R.J. Bursik, B.J. Arneklev, Testing the core empirical implications of Gottfredson and Hirschi's general theory of crime, J. Res. Crime Delinq. 30 (1) (1993) 5–29, doi:10.1177/0022427893030001002.

[7] B.J. Arneklev, H.G. Grasmick, R.J. Bursik, Evaluating the dimensionality and invariance of "low self- control, J. Quant. Criminol. 15 (1999) 307–331.

[8] M.R. Kamaluddin, N.S.M. Shariff, G.A.M. Saat, A unidimensional scale for self-control in Malaysian settings, Edu. Med. J. 5 (4) (2013), doi:10.5959/eimj.v5i4.184.

[9] E. Zavala, D.L. Kurtz, Using Gottfredson and Hirschi's general theory of crime to explain problematic alcohol consumption by police officers: a test of self-control as self-regulation, J. Drug Issues 47 (3) (2017) 002204261770689, doi:10.1177/0022042617706893.