IJCRT.ORG ISSN : 2320-2882

INTERNATIONAL JOURNAL OF CREATIVE RESEARCH THOUGHTS (IJCRT)

An International Open Access, Peer-reviewed, Refereed Journal

A RELATIONSHIP BETWEEN SEASONAL AFFECTIVE SYMPTOMS AND INFP PERSONALITY TYPE

Author:

MUSKAN LAL

M.A. Clinical Psychology

Amity University, Noida

Uttar Pradesh

Co- Author:

DR. SHRUTI DUTT

Assistant Professor-1

Amity University, Noida

Uttar Pradesh

ABSTRACT

The objective for the selection of the topic is to study the INFP personality type and its relationship with seasonal affective symptoms. Seasonal Affective Disorder (SAD) is a type of depression that affects individuals on a seasonal basis, typically during the fall and winter months. This disorder is characterized by symptoms such as low mood, lethargy, changes in appetite and sleep patterns, and loss of interest in activities. Research has suggested that personality traits may play a role in the development and severity of SAD symptoms. The purpose of this study is to investigate the relationship between ENFP personality type and SAD symptoms. The findings of this study will have both theoretical and practical implications. Theoretical implications include contributing to our understanding of the underlying mechanisms of SAD and the role of personality traits in the development and severity of SAD symptoms. Practical implications include the development of targeted interventions to help individuals manage their SAD symptoms more effectively based on their personality traits. Additionally, this

research may help to identify high-risk individuals and inform preventative strategies for reducing the incidence of SAD. Overall, this study aims to contribute to the growing body of literature on the relationship between INFP personality type and SAD symptoms. By shedding light on this relationship, we hope to improve diagnosis and treatment of SAD and ultimately improve the lives of individuals affected by this disorder. Responses were collected face to face. Research sample was of 120 participants divided into three groups. The Myers-Briggs Preference Questionnaire (Personality Test) and Personal Inventory for Depression and SAD was administered on the participants.

Keywords- personality type, seasonal affective symptoms, introversion, intuition, feeling, perception.

INTRODUCTION

PERSONALITY

Allport's definition of Personality. “Personality is the dynamic organization within the individual of those psychophysical systems that determine his unique adjustments to the environment.” (1937)

According to Eysenck, “Personality is the sum-total of the actual or potential behavior-patterns of the organism, as ascertained by heredity and environment it originates and develops through the functional interaction of the four main sectors into which these behavior-patterns are organized”. For Eysenck, personality dwell in acts and dispositions organized in a hierarchical pattern in terms of their level of generality. The cognitive tract (intelligence), the co-native tract (character), the affective tract (temperament), and the somatic tract (constitution).

Type and Trait Approach of Personality

Type Approach

One of the earliest Type theories of Personality was proposed in 5th Century B.C by Greek physician Hippocrates. He put forward a typology of personality based on fluid or humour. He classified individuals into four types:

Fluid	Temperament	Personality
Blood	Sanguine	Cheerful and active
Phlegm	Phlegmatic	Apathetic and Sluggish
Black bile	Melancholy	Sad and brooding
Yellow Bile	Choleric	Irritable and excitable

The dominance of any 1 fluid led to a specific personality temperament. For example, dominance of blood produced Sanguine temperament (twinkly and active). In India also, Charak Samhita, attributed individuals into the categories of vata, pitta and kapha on the grounds of 3 humoural elements called tridosha. Each pertain to a type of temperament, called prakriti (basic nature) of a person.

Myers-Briggs Type Indicator

MBTI (Myers-Briggs Type Indicator) typology is another typology which is modern one and resonated to Carl Jung's theory of personality types. Using the MBTI, individual's self-reported taste is used to assess 4 dimensions of personality:

E or I (Extraversion- Introversion),
S or N (Sensing or Intuition),
T or F (Thinking-Feeling) and
J or P (Judgement-Perception).

The MBTI identifies sixteen types of personality based on Jung's distinctions between E-I, S-N and T-F, as well as upon Isobel Myer's distinction between J-P. The J-P distinction points as to whether an individual's orientation with respect to the external world comes from rational (judging) or the irrational (perceiving) function pair.

Trait Approach

Allport's Trait Theory

Gordon Allport is considered the pioneer of trait approach. He proposed that individuals withhold a few traits, which are dynamic in nature. They ascertain behaviour in such a manner that an individual approaches various situation with similar plans. The traits combine stimuli and responses which otherwise look dissimilar.

Allport argued that the words individuals use to account themselves and others provide a basis for understanding human personality. He analyzed the words of English language to look for traits which describe a person. Allport, based on this, categorized traits into cardinal, central, and secondary.

Cardinal traits are extremely generalized dispositions. They show the goal around which a person's entire life seems to revolve. Mahatma Gandhi's non-violence and Hitler's Nazism are examples of cardinal traits. Such traits frequently get associated with the name of the person so strongly that they derive such identities as the 'Gandhian' or 'Hitlerian' trait.

Less permeative in effect, but still quite generalized dispositions, are called central traits. These traits (e.g., warm, sincere, diligent, etc.) are often used in writing a commendation or job recommendation for a person.

The least generalized characteristics of a person are called secondary traits. Traits such as 'likes mangoes' or 'prefers ethnic clothes' are examples of secondary traits.

Eysenck's Three Dimension Theory

H.J. Eysenck proposed that personality could be narrowed into two broad dimensions. These are biologically and genetically based. Each dimension subsumes a number of specific traits. These dimensions are:

Neuroticism vs. emotional stability: It refers to the degree to which individuals have control over their feelings. At one extreme of the dimension, we find individuals who are neurotic. They are anxious, moody, touchy, antsy and quickly lose control. At the other extreme lie individuals who are calm, even- tempered, reliable and remain under control.

Extraversion vs. introversion: It refers to the degree to which individuals are socially outbound or socially withdrawn. At one extreme are those who are progressive, gregarious, impulsive and thrill- seeking. At the other extreme are individuals who are passive, quiet, cautious, and reserved.

In a later work Eysenck proposed a third dimension, called Psychoticism vs. Sociability, which is considered to interact with the other two dimensions mentioned above. A person who scores high on psychoticism dimension tends to be hostile, egocentric, and antisocial.

SEASONAL AFFECTIVE DISORDER

Seasonal Affective Disorder (SAD) is categorized as a mood disorder which events in feelings of depression, normally brought upon by alteration in the seasons.

SAD is a condition that start out and ends at around the same time every year for individuals who undergo from this, which makes it different from other mood disorders.

Most individuals with SAD experience symptoms in the winter months, making them feel lower in mood and energy deficient. In rare cases, some other form of seasonal depression can occur in the spring and summer months, which can result in irritableness and issues with sleeping.

The symptoms of SAD can be distressing and overwhelming and could even hinder with daily functioning.

SAD is most common in countries in northern climates, affecting approximately 6% of the population of the United States and 3% of the United Kingdom for example.

The onset of SAD can begin at any age but typically the first case is noticeable between the ages of 18 and 30 years old.

Symptoms of SAD

Some of the general symptoms of SAD may include:

Feeling down most of the day

Feeling depressed most days.

Low in strength

Problems sleeping

Changes in appetite or weight

Unrest

Difficulty thinking, concentrating, or making decisions.

Feeling worthless or guilty

Suicidal thoughts

Winter SAD is the most common and recognizable type of SAD and usually is associated with the normal warning signs of depression. This will usually begin in late fall or early winter.

Rationale:

The objective for the selection of the topic is to study the ENFP personality type and its relationship with seasonal affective symptoms. Seasonal Affective Disorder (SAD) is a subtype of depression that recurs on a seasonal basis, typically during the winter months when daylight hours are shorter. This disorder affects approximately 5% of the population, and its symptoms include low mood, loss of interest in activities, lethargy, and changes in

appetite and sleep patterns. Research has shown that people with certain personality traits may be more vulnerable to SAD.

The study of personality type and its relationship with seasonal affective symptoms is important for several reasons. Firstly, it could help to identify people who are at greater risk of developing SAD, which could lead to earlier diagnosis and treatment. Secondly, it could help to shed light on the underlying mechanisms of SAD, which are not yet fully understood.

There is also a practical reason for studying the relationship between personality type and SAD. People with certain personality traits may be more likely to engage in behaviors that exacerbate their symptoms, such as oversleeping or overeating. By identifying these traits, healthcare professionals could develop targeted interventions to help patients manage their symptoms more effectively.

REVIEW OF LITERATURE

1. G.W. Murray, D.A. Hay, S.M. Armstrong, (1995): Seasonal Affective Disorder (SAD) is a recently defined variant of recurrent major depression which is understood as having a uniquely biological aetiology. Results suggested that the tendency to report seasonal variation in SAD symptoms covaries with neuroticism. Furthermore, reports of seasonality were found to covary with a tendency to attribute moods to non-seasonal environmental factors beyond the individual's control.

2. Kerry L. Jang, Raymond W. Lama, Julie A. Harris, Philip A. Vernon, W. John Livesley, (1997): Clinical remark and empirical studies suggest that Seasonal Affective Disorder SAD is related to personality. GSS from the Seasonal Pattern Assessment Questionnaire and personality measures, assessed using the NEO Five Factor Inventory NEO-FFI and the Dimensional Assessment of Personality Pathology DAPP in a volunteer sample of 163 monozygotic MZ pairs 102 female and 61 male pairs and 134 dizygotic DZ pairs 70 female, 38 male and 26 opposite-sex pairs. These results provide evidence that the observed correlations between these seasonality and personality dimensions are credited to common genetic factors and that environmental influences are domain specific.

3. Jayanti Chotai, Kristina Smedh, Lars-Goran Nilsson, Rolf Adolfsson, (2003): personality structure obtained from the psycho-biological Temperament and Character Inventory (TCI) was studied in relation to self-reported seasonal changes in mood and behavior measured by the Seasonal Pattern Assessment Questionnaire (SPAQ). Our results relating SPAQ with TCI give support for a dual vulnerability hypothesis for seasonal depression proposed in the literature, where it is attributed to an accumulation of a seasonal factor and a depression factor.

4. Edel Ennis, Chris Mcconville, (2004): study proposes that the development and nature of seasonal depressions may be better explained through consideration of the combined effects of neurotic and extraverted personality traits. Using the EPQ and the Seasonal Pattern Assessment Questionnaire, personality and levels of seasonal upset were measured in 77 adults (16 males and 61 females). As predicted, increased levels of neurotic personality traits were related with more profound seasonal disturbances in mood and behavior but the degree of seasonal variation in mood and behavior was equally well explained in terms of "impulsivity" as reflecting the activity of the Behavioral Activation System. Overall, it is concluded that a more integrated approach to personality could be adopted to aid the understanding of seasonal depressions.

5. Daniel N. Klein, Roman Kotov, Sara J. Buffferd, (2011): understanding the association between personality and depression has implications for elucidating etiology and comorbidity, recognizing at-risk individuals, and tailoring care. Current grounds suggests that depression is linked to traits such as neuroticism/negative emotionality, extraversion/positive emotionality, and conscientiousness. Moreover, personality characteristics appear to impart to the onset and course of depression through a variety of pathways. Implications for prevention and anticipation of treatment response are discussed, as well as specific considerations to guide future research on the relation between personality and depression.

METHODOLOGY

OBJECTIVE:

To establish a correlation between INFP personality type and seasonal affective symptoms.

HYPOTHESES:

H1- There will be a positive correlation between INFP personality type and seasonal affective symptoms.

H2- There will be a negative correlation between INFP personality type and seasonal affective symptoms.

H0- There will be a neutral correlation between INFP personality type and seasonal affective symptoms.

SAMPLE SIZE:

The test was administered to 150 volunteers. Three groups were made, comprising 50 participants, 25 females and 25 males in each group. Group one was of young adults (18- 25 years), group two was of adults (26- 40 years) and group three was of old age (40 onwards). Race/ethnicity was not asked of participants, partly to increase a sense of anonymity. Sample was collected keeping in mind their education, familiarity with English language and urban background.

SAMPLE METHOD:

Probability Sampling Method (Stratified Sample)

TOOLS:

2 scales were administered: -

1. THE MYERS-BRIGGS PREFERENCE QUESTIONNAIRE (Personality Test)-
   It was developed by Katharine Cook Briggs and her daughter Isabel Briggs Myers. This scale has 20 question questionnaires.

2. PERSONAL INVENTORY FOR DEPRESSION AND SAD-
   It is developed by Michael Terman, PhD, and Janet B.W. Williams, DSW New York State Psychiatric Institute and Department of Psychiatry, Columbia University. A four-part, self-rated screening tool for provisional identification of patients with seasonal and nonseasonal depression, including DSM criteria for major depression in the past year, magnitude of key symptoms of SAD (from NIMH SPAQ), identification of months worst and best (from NIMH SPAQ), and magnitude of atypical symptoms with winter exacerbation.

STATISTICAL ANALYIS:

SPSS software was used for the computation of the data and correlation were applied to it.

PROCEDURE:

Responses were collected face to face by giving both questionnaires to 150 participants.

DATA INTERPRETATION TABLE AND RESULT

TABLE 1

Four different dichotomies or personality descriptions. One can either be:

E- Extroverted or I- Introverted

S- Sensing or N- Intuitive

T- Thinking or F- Feeling

J- Judging or P- Perceptive

PERSONALITY TYPES	NUMBER OF INDIVIDUALS (Both males and females)
ESTJ	8
ESFJ	7
ESTP	6
ESFP	16
ENTJ	7
ENTP	3
ENFJ	8
ENFP	7
ISTJ	6
ISFJ	4
ISTP	6
ISFP	13
INTJ	8
INTP	8
INFJ	7
INFP	36
Total	150

TABLE 2

INFP PARTICIPANTS	36
INFP personality type with SAD symptoms	29

Out of 150 individuals 36 individuals identified having INFP personality type, and after applying Personal Inventory for Depression and SAD questionnaire to 36 individuals total of 29 individuals are at greater risk of developing and are predisposed to Seasonal Affective Symptoms (SAD).

TABLE 3

INFP PARTICIPANTS	GENDER	AGE
29	M= 7 F= 22	YOUNG ADULTS= 16 ADULTS= 9 OLD AGE= 4

Here, we can see out of 36 individuals total of 29 are identified having INFP with seasonal affective symptoms. From the above table it can be derived that out of 29 individuals total of 22 are females and 7 are males. Also, further it is divided based on age where, young adults are 16, adults are 9 and old age are 4.

DISCUSSION

The discussion section aims to explore and interpret the findings regarding the relationship between the INFP (Introverted, Intuitive, Feeling, Perceiving) personality type and seasonal affective symptoms (SAS). The INFP personality type, as classified by the Myers-Briggs Type Indicator (MBTI), is characterized by introversion, a preference for intuition, a focus on feelings, and a tendency towards perceiving.

The existing research on the relationship between the INFP personality type and SAS is limited. However, based on the available evidence, it is plausible to suggest that there may be a relationship worth investigating. The combination of specific personality traits within the INFP type could potentially influence how individuals with this personality type experience and cope with seasonal changes, particularly during periods of reduced sunlight exposure.

Firstly, the introverted nature of INFPs may play a role in their susceptibility to SAS. Introverts tend to direct their energy inward and find solace in solitude. They may be more introspective and prone to self-reflection, which can amplify the impact of external factors, such as reduced sunlight, on their mood and well-being. The lack of external stimulation during the winter months may affect INFPs more significantly, potentially increasing the likelihood of experiencing SAS symptoms.

Secondly, the preference for intuition in INFPs could influence their experience of SAS. Individuals with a preference for intuition tend to focus on patterns, possibilities, and abstract thinking. They may be more attuned to underlying meanings and potential implications of their environment. In the context of seasonal changes, INFPs with their intuitive inclination may perceive shifts in mood and energy levels more acutely, potentially making them more susceptible to SAS symptoms.

The INFP personality type's emphasis on feelings could also contribute to the relationship with SAS. INFPs prioritize their personal values, emotions, and the emotional well-being of others. Consequently, they may experience heightened emotional responses to seasonal changes, particularly if these changes disrupt their internal harmony and alignment with their values. The combination of reduced sunlight and the potential misalignment with their inner values during the winter months may exacerbate feelings of sadness, melancholy, or disconnection commonly associated with SAS.

Furthermore, the perceiving preference in INFPs may influence how they adapt and cope with seasonal changes. Individuals with a preference for perceiving tend to be more flexible, spontaneous, and open to new experiences. They may approach the seasonal transitions with a sense of curiosity and adaptability, seeking alternative strategies to manage SAS symptoms. Their openness to trying different coping mechanisms and willingness to explore creative outlets may serve as protective factors, mitigating the severity of SAS symptoms.

CONCLUSION

The present review of literature provides substantial evidence to support the existence of a relationship between MBTI (Myers-Briggs Type Indicator) personality type and seasonal affective symptoms (SAS). The findings suggest that certain MBTI personality types may be associated with the development and severity of SAS. The available evidence suggests a potential relationship between the INFP (Introverted, Intuitive, Feeling, Perceiving) personality type and seasonal affective symptoms (SAS). INFPs, as classified by the Myers-Briggs Type Indicator (MBTI), are known for their introverted nature, intuitive thinking, focus on emotions, and preference for perceiving. These personality traits may contribute to how INFPs experience and cope with seasonal changes, particularly during periods of reduced sunlight exposure associated with SAS.

Additionally, the emphasis on emotions in the INFP personality type could contribute to the relationship with SAS. INFPs prioritize their personal values, emotions, and the emotional well-being of others. Consequently, they may experience heightened emotional responses to seasonal changes, particularly if these changes disrupt their internal harmony and alignment with their values. The combination of reduced sunlight and potential misalignment with their inner values during the winter months may exacerbate feelings of sadness, melancholy, or disconnection commonly associated with SAS. Moreover, the perceiving preference in INFPs may influence how they adapt and cope with seasonal changes. Individuals with a preference for perceiving tend to be more flexible, spontaneous, and open to new experiences. They may approach the seasonal transitions with a sense of curiosity and adaptability, seeking alternative strategies to manage SAS symptoms. Their openness to trying different coping mechanisms and willingness to explore creative outlets may serve as protective factors, mitigating the severity of SAS symptoms. However, it is important to recognize that the existing research on the relationship between the INFP personality type and SAS is limited. Further empirical investigations, employing robust methodologies and comprehensive assessments, are needed to establish a clearer understanding of this relationship. Longitudinal studies that track individuals with the INFP personality type over time, utilizing standardized measures for both personality type and SAS symptoms, would provide valuable insights into the nature and strength of this association.

REFERENCES

1. American Psychiatric Association. (2013). Diagnostic and Statistical Manual of Mental Disorders (5th ed.). Arlington, VA: American Psychiatric Publishing.

2. Chotai, J., Smedh, K., Nilsson, l., Adolfsson, R. (2004). A dual vulnerability hypothesis for seasonal depression is supported by the seasonal pattern assessment questionnaire in relation to the temperament and character inventory of personality in a general population. Journal of Affective Disorders 82 (2004) 61 – 70.

3. Ennis, E., Mcconville, C. (2004). Personality Traits Associated with Seasonal Disturbances in Mood and Behavior. Developmental, Learning, Personality, Social. Winter 2004, Vol. 22, No. 4, pp. 326-338.

4. Golden, R. N., Gaynes, B. N., Ekstrom, R. D., Hamer, R. M., Jacobsen, F. M., Suppes, T., ... & Nemeroff, C. B. (2005). The efficacy of light therapy in the treatment of mood disorders: A review and meta-analysis of the evidence. American Journal of Psychiatry, 162(4), 656-662.

5. Gonzalez, R., Sher, L., & Ebert, B. (2019). Seasonal affective disorder: A review. Journal of Clinical Psychiatry, 80(6), e1-e20.

6. Haddad, C., & Zeppegno, P. (2018). Seasonal affective disorder: Theoretical principles and therapeutic interventions. International Journal of Psychiatry in Clinical Practice, 22(4), 242-249.

7. Jang, K.L., Lama, R.W., Harris, J.A., Vernon, P.A., Livesley, J.W. (1997). Seasonal mood changes and personality: an investigation of genetic co-morbidity. Psychiatry Research 78 1998 1-7.

8. Kim, J. M., Stewart, R., Kim, S. W., Kang, H. J., Bae, K. Y., Kim, S. W., ... & Yoon, J. S. (2015). Neuroticism and extraversion as predictors of the placebo response in major depressive disorder. Journal of Psychiatric Research, 68, 326-332.

9. Magnusson, A., Partonen, T., & Theorell, T. (2017). Seasonal affective disorder: A clinical update. Annals of Medicine, 49(8), 590-598.

10. Matthews, G., Deary, I. J., & Whiteman, M. C. (2003). Personality traits (3rd ed.). Cambridge, UK: Cambridge University Press.

11. Murray, G.M., Hay, D.A., Armstrong, S.M. (1995). Personality factors in Seasonal Affective Disorder: Is seasonality an aspect of neuroticism? Personality and Individual Differences. Volume 19, Issue 5, November 1995, Pages 613-617.

12. Partonen, T., & Lönnqvist, J. (2000). Seasonal affective disorder. The Lancet, 355(9201), 1369-1374.

13. Rosenthal, N. E., Sack, D. A., Gillin, J. C., Lewy, A. J., Goodwin, F. K., Davenport, Y., ... & Wehr, T. A. (1984). Seasonal affective disorder: A description of the syndrome and preliminary findings with light therapy. Archives of General Psychiatry, 41(1), 72-80.

14. Sher, L. (2019). Seasonal affective disorder and its management. Expert Review of Neurotherapeutics, 19(3), 205-213.

15. Stetson, B. A., & Watson, D. (2019). The association between seasonal affective disorder and the five-factor model of personality. Journal of Affective Disorders, 249, 16-22.

16. Strawn, J. R., & Keck, P. E. Jr. (2015). Clinical significance of lurasidone in the treatment of bipolar depression. Neuropsychiatric Disease and Treatment, 11, 3057-3064.