

PERSONALITY TRAITS, INTERPERSONAL DIFFICULTIES, AND MENTAL HEALTH PROBLEMS OF KHAT ADDICT AND NON-KHAT ADDICT: A COMPARATIVE STUDY

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PERSONALITY TRAITS, INTERPERSONAL DIFFICULTIES, AND MENTAL HEALTH PROBLEMS OF KHAT ADDICT AND NON-KHAT ADDICT: A COMPARATIVE STUDY

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ABSTRACT

OBJECTIVES: The study intended to find the differences between Khat addict and non-Khat addict on the basis of personality traits, interpersonal difficulties, and mental health problems.

METHOD: A cross-sectional research design was used, and the sample was selected from undergraduate university students through a stratified random sample. There was an approximately equal number of all four years of undergraduate students in the sample and 247 of the sample were Khat-user, and 94 were non-Khat users that were taken as controls. The participants were all males and aged between 18 to 25. The scales used were Eysenck Personality Questionnaire (EPQ), newly develop Khat Interpersonal Difficulties Scale (KIDS), and the Depression Anxiety Stress Scale (DASS).

RESULT: It was found that students who used Khat scored high on neuroticism ($p < 0.001$) and psychoticism ($p < 0.01$), and at same time experience more interpersonal difficulties and mental health problems ($p < 0.001$) as compared to those students who did not use Khat. The study determined as well a strong positive relationship between personality traits (neuroticism and psychoticism) with interpersonal difficulties and mental health problems ($p < 0.001$).

CONCLUSION: Khat use is related to a high score on neuroticism and psychoticism and the experience of more interpersonal difficulties and mental health problems.

KEYWORDS: Personality Traits, Interpersonal Difficulties, Mental Health Problems, Khat Addict, Non-Khat Addict.

INTRODUCTION

Khat is defined as a young and evergreen tree whose leaves and shoots are chewed.

Catha-edulis is the scientific name of khat and belongs to Celastraceae family. It is estimated to grow normally up to ¹⁴ 6 m in height, in an equatorial area, it can get larger and reach up to 25 m.

Khat can be present in many different countries that extend from Arabian Peninsula, East Africa and long way up to South Africa.¹ It is cultivated on porches based on slopes where the trees develop in lines blended once in a while with different crops. The Khat tree is resilient which makes it possible to live up to 75-100 years. The tree needs to grow for 3– 4 years before the leaves can be collected.²

Chewing Khat interferes with many aspects of the normal functioning of an individual's life. It has an impact on the physical, psychological, social, and financial conditions of the individuals. As for physical problems, Khat causes gastritis, constipation, loss of appetite, malnutrition, and teeth deterioration or darkening.³ Likewise, it elevates blood pressure and can cause hypertension, cardiovascular diseases, obesity and many more problems.^{4, 5} It also relaxes the wall of the bladder and creates closure of internal sphincter. Furthermore, it may be a source of urine retention and a decrease in the maximum urine flow throughout the track 6. With regard to sexual behaviors, the users of Khat experience low libido and spermaturia that can diminish sexual performances. Consuming Khat during pregnancy can lead to premature birth of the child.

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The consumption of Khat is also related to the ⁶ risk of psychiatric problems such as insomnia, lethargy and hopelessness. In some cases, it is reported that the chewers experience a state of mania or hypomania. Moreover, Khat can cause some psychosis, but yet there are few incidents. Therefore, the relationship between psychosis and Khat is not clear as of yet. Some

studies revealed that chewing Khat exacerbates the symptoms of psychosis or mania while some other studies mentioned that using Khat increases the likelihood of developing these disorders. Likewise, constant Khat intake is associated with increased physical and verbal aggression, as well as violence in general. Aggression and violence result from decreased serotonin level and its metabolism. A group of WHO experts exposed that the habit of chewing Khat had a moderate psychic dependence in those people who used it regularly. Likewise, withdrawal symptoms were seen in individuals who had consumed Khat for a long period of time that included lethargy mild depression, slight trembling, fatigue, and recurrent nightmares.³ It was found that a considerable amount of mood changes such as anxiety and depression during the session of chewing Khat.

⁹Also, irritability, reactive depression, and anxiety were linked ²to the consumption of Khat.

Some studies concluded ¹³that chewing Khat habitually is associated with insomnia ¹⁰, altered stress response ¹¹, and cognitive deficits ¹².

Socially, the habit of chewing Khat has a devastating impact on the family. The conception of Khat deteriorates the relationship between husband and wife. If a husband spends most of his day time on chewing Khat this can result in him coming home late at night. Furthermore, a lack of sufficient sleep and getting up late in the morning increases the likelihood of unemployment, which could lead to the using the family income to buy khat. These problems escalate the concerns of wife about the finances and other matters of the family, which ultimately aggravates conflict between spouses. On the other hand, Khat Addiction has a tremendous impact on children whose fathers consume Khat. These fathers spend less time with their kids as they return late in the night when children are sleeping and they wake up late in the morning after children go to school. Some fathers try to fill this gap by chewing Khat at home to spend time with their children. However, the mood swings that are associated with Khat consumption

make children confused about their father's behavior; who is happy and talkative at one time but gets irritated at another time.¹³

For as far back as decades the utilization of khat has expanded drastically in Somalia. Before the civil war, Khat was chewed mostly once a week like Thursdays or Fridays and on specific occasions like weddings, funerals, religious get-togethers (e.g., maulids). It was commonly used by specific professions like artists, drivers, and some religious people for the purpose to be alert while they are doing their work. However, due to the conflict, the vast male population started chewing Khat every day, and the socio-cultural norms that were governing the conception of Khat became weakened. The unemployment increased that created a large and unstructured time for most of the youth and made them pass their time on chewing Khat. Because of the increase of Khat chewing, the economy of the country deteriorated as the Somalian import Khat from the neighboring countries¹⁴. Additionally, WHO found that one out of three Somalians experiences some form of mental health issue and that Khat is one of the factors lead to such a high prevalence.¹⁵ As mentioned above, Khat effected many Somalian families and made the husbands neglect their responsibilities, which caused many wives to fulfill both the role of mother and father for their children.¹³

Even though there are studies on ¹²the effects of Khat on physiological, social, and psychological functions around the world, very few studies of effect of Khat have been done in the Somali population who live in Somalia.¹⁶ Therefore, the current study focuses on finding personality traits, interpersonal difficulties, and mental health problems of Khat users by comparing them to non-Khat users. Based on literature of other addictions, it is hypothesizing that Khat users have more neuroticism and psychoticism personality traits, and experience more interpersonal difficulties and mental health problems than non-khat users.

METHOD

The participants were male Somali undergraduate university students aged between 18 to 25 years old ($M = 23.05$, $SD = 1.99$). In order to select the sample, we employed a stratified random sampling technique, and the four levels of undergraduate university students were divided equally into the sample. The total sample was 341, in which 247 of them were Khat addicts, while 94 were non-Khat addicts that were taken as controls. The study only chose males as participants, because few females chew Khat, and they hide their habit as it is taboo for the country. Most of these females are adults, and hardly, it can find a female university student that chews Khat. Regarding university students, it was selected as they can comprehend the language of the scales.

Instruments

Khat Interpersonal Difficulties Scale (KIDS).

The newly developed KIDS was used for measuring interpersonal difficulties among Khat addicts. KIDS comprises of 33 difficulties as experienced and expressed by Khat addicts. The instructions for KIDS were: "Following are some characteristics of people who use Khat. Please read each item carefully and judge the extent to which it applies to you. There are four options to choose from, circle only one option on each statement that applies to you". The scoring options included (0) *not at all*, (1) *sometimes*, (2) *often*, (3) *always*. High scores represented more interpersonal difficulties an individual experienced. Concurrent validity KIDS and ¹¹Inventory of Interpersonal Problems Short Circumplex (IIP-SC) ¹⁷ had significant positive correlation ⁵ $r=0.79$ ($p<0.001$). Test-retest reliability $r=0.85$ ($p<0.001$), split-half ¹⁶reliability factor one (personal related) $r=0.77$ ($p<0.001$), and factor two (Khat related) $r=0.74$ ($p<0.001$)

³ Eysenck Personality Questionnaire Revised-Short Form (EPQR-S).

EPQR-Short ¹⁸ consisted 48 items, and has four subscales ³ neuroticism, extraversion, and psychoticism, and lie scale with 12 items each. Every question has two responses, 'yes' or 'no'. The scale has high reliability 0.89 extraversion, 0.86 neuroticism, 0.78 for psychoticism, and 0.84 Lie Scale. Internal consistency of the three major scales is approximately 0.80 (Rodgers, 1995). Also, the scale had strong concurrent validity. ¹⁹

¹ Depression anxiety stress scale (DASS).

The DASS ²⁰ consisted of 21 items and had three subscales with seven statements each. ¹⁰ Each statement is rated on a 5-point scale, and ¹ factor loadings of the subscales were between .39 to .88. The internal consistency of depression, anxiety, and stress was ¹ .90, .92, and .92 respectively. The test-retest reliability for overall scale was found to be .98. In a correlation with ¹ Beck Depression Inventory ²¹, and the Beck Anxiety Inventory ²² criterion-related validity was scored .87 and .84, respectively.

Procedure

Throughout the study, ethics were the guidance for the conducting of every step. Firstly, oral informed consent from participants was taken before they took part in the study. Participants were told that they had the freedom to leave the study whenever they wanted, and no strict rules were applied to them. For the data collection, the participants were told the aims and objectives of the study. Subsequently, the researcher selected 341 participants through stratified random sampling from university students. 247 of them were Khat users and the rest 94 were non khat users that taken as controls. These participants were given three scales that measured personality traits, interpersonal difficulties, and mental health problems. It was requested to fill the

questionnaires based on their feasibilities, by starting from the demographic sheet and followed by the three scales. After the participants filled the questionnaires, data entry followed. For data analysis we used SPSS to help to find out the personality traits, interpersonal difficulties, and mental health problems of Khat addiction among Somali university students.

RESULTS

This section deals the result of comparison between Khat addict and non-Khat addict. Starting with displaying demographic characterizes, and then a comparison of Khat addict and non-Khat addict by personality traits, interpersonal difficulties, and mental health problems. Finally, it will be shown the correlations between personality traits, interpersonal difficulties and mental health problems of Khat addict.

TABLE I COMPARING KHAT ADDICT TO NON-KHAT ADDICT

	Pattern of using khat					
	Khat Users (n=247)		Non-Khat Users (n=94)			
Variables	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>t</i>	<i>p</i> <
Personal Related	23.54	10.39	11.42	10.49	9.59	.001***
Khat Related	19.53	7.89	7.92	6.34	12.77	.001***
KIDS Total	43.08	17.14	19.35	15.77	11.67	.001***
Depression	8.68	4.03	4.02	3.76	9.69	.001***
Anxiety	9.33	3.94	4.35	3.38	10.83	.001***
Stress	9.41	3.84	4.36	3.33	11.23	.001***
DASS Total	27.42	10.65	12.73	9.08	11.83	.001***
Extraversion	6.64	2.24	7.03	2.05	-1.46	.145
Neuroticism	6.46	2.94	4.86	3.02	4.45	.001***
Lie scale	5.37	2.10	6.00	2.36	-2.38	.018**
Psychoticism	5.06	1.87	4.41	1.76	2.92	.004**

df=339, **p*<0.001, ***p*<0.01

Table 1 indicated that students who use Khat experience more interpersonal difficulties and mental health problems than students who don't use Khat. Moreover, Khat users were higher on Neuroticism and Psychoticism personality traits than non Khat users. However, non Khat

users were higher on Lie scale than khat users and there were no significant differences on Extroversion personality traits.

TABLE II CORRELATION BETWEEN PERSONALITY TRAITS AND INTERPERSONAL DIFFICULTIES

Factors	<i>B</i>	<i>SEB</i>	β	<i>t</i>	<i>p</i> <
	Interpersonal Difficulties				
Extraversion	-.01	.45	-.00	-.02	.987
Neuroticism	1.80	.38	.31	4.77	.001***
Lie Scale	.05	.52	.01	.10	.920
Psychoticism	2.46	.53	.28	4.63	.001***

*** $p < 0.001$

Regression analysis revealed that Neuroticism and Psychoticism were strongly positive predictor of having interpersonal difficulties, by using the enter method with a significant ($p < 0.001$) and R value of 0.18 and R² value of 0.17. Multiple Regression analysis also showed that Extraversion and Lie Scale were not a predictor of interpersonal difficulties.

TABLE III CORRELATION BETWEEN PERSONALITY TRAITS AND MENTAL HEALTH PROBLEMS

Factors	<i>B</i>	<i>SEB</i>	β	<i>t</i>	<i>p</i> <
	Mental Health Problems				
Extraversion	.16	.28	.03	.58	.561
Neuroticism	1.01	.23	.28	4.33	.001***
Lie Scale	.47	.32	.09	1.45	.149
Psychoticism	1.99	.33	.35	6.06	.001***

*** $p < 0.001$

Regression analysis revealed that Neuroticism and Psychoticism were strongly positive predictor of having mental health problems, by using the enter method with a significant

($p < 0.001$) and R value of 0.21 and R² value of 0.20. Multiple Regression analysis also showed that Extraversion and Lie Scale were not a predictor of mental health problems.

DISCUSSION

The present study identified those students who chewed khat scores as high on the factors of Neuroticism and Psychoticism of the three dimensions of Eysenck Personality Questionnaire EPQ as compared to those students who don't chew Khat. However, non-khat chewers scored high on the Lies scale and there were no significant difference on Extraversion on the two groups. It was found as well that the students who use Khat experienced more interpersonal difficulties and ⁸ mental health problems as compared to the control group. Lastly, the study determined a strong positive relationship between personality traits (neuroticism and psychoticism) with interpersonal difficulties and mental health problems ($p < 0.001$).

Starting with the differences of personality traits between Khat users and non-khat users, many studies support the relationship between the three Eysenck personality traits and addiction. Sahasi, Chawla, Bhushan, and Kacker ²³ found heroin addicts scored high ² on psychoticism, neuroticism and lie scale and low scores on extroversion when compared to normal controls. Similar findings were on these studies ^{24, 25}. Moreover, Spielberger and Jacobs ²⁶ studied the connection between personality traits and the starting or maintaining smoking habit. They discovered smokers had high scores on Neuroticism, Psychoticism, and Extraversion, and low scores on the Lie Scale as compared to non-smokers. They additionally inferred that those ⁴ people who score high on Neuroticism and Psychoticism tend to utilize substances to decrease tension and stress.

Regarding interpersonal difficulties, the study found that students who chew Khat experience more interpersonal difficulties than the non-Khat users. Around 30% to 40% of alcoholics seem to live alone, and the same number of as half live disconnected from their relatives.²⁷ Old men with heavy-drinking was found to be likely live isolated, contact less with

their family and friends, and less take part in all kind of social activities.²⁶ High scores on the Drug Abuse Screening Test (DAST) were positively identified to be associated with interpersonal problems.²⁹ It is believed that individuals with interpersonal difficulties had attachment problems to their caregivers in early childhood. They develop an insecure attachment to their significant figure which manifests in adulthood as having challenges to relate to other people. Insecure attachment creates the person to experience high rejection sensitivity, lower self-esteem, and negative view of self and others. As the individual feels the pain of isolation, it directly effects on motivation to use drug or alcohol in order to relieve tension and to establish a bond with the drug.³⁰

The present study discovered as well that Khat users have more mental health problems than non-khat users. Many studies support the notion that substance abuse is associated with negative effects including anxiety, depression, and stress.^{31,32,33} Self-medication hypothesis believes that action of every drug of abuse is to decrease the adverse and painful effects, and the person is choosing the substance to manage a particular emotional state with either overwhelmed with affects or not feeling emotions at all. In other words, those individuals who are suffering psychological problems are more vulnerable to use drugs to copy the negative effect.³⁴

Finally, the present study also found a strong relationship between having Neuroticism and Psychoticism personality traits and experiencing interpersonal difficulties and mental health problems. As per past investigations,^{35,36,37} Neuroticism had a strong link to interpersonal difficulties. The individuals who scored ⁴high on both Neuroticism and Psychoticism are altogether more prone to report having relationship issues.³⁸ Clark, Watson, and Mineka³⁹ believed that Neuroticism is also associated with all anxiety and depression disorders. Moreover,

people with a high score on Psychoticism experience with negative emotions and behavior patterns such as depression, anxiety, anger, and so on. ⁴⁰

CONCLUSION

Those who addict on Khat ² are more prone to experience interpersonal difficulties and mental health problems. They also score high on ⁷ Neuroticism and Psychoticism personality traits and score low on Lie Scale as compared to a non-Khat addict. Moreover, the study found a strong relationship between personality traits (Neuroticism and Psychoticism) and experiencing interpersonal difficulties and mental health problems.

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