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What constitutes problematic khat use? An exploratory mixed methods study in Ethiopia

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Background: Khat is a psycho-stimulant herb, which has been in use in traditional societies in East Africa and the Middle East over many centuries. Although khat is reported to cause various health problems, what constitutes problematic khat use has never been systematically investigated. This study explored the acceptable and problematic uses of khat from the perspective of users.

Methods: The study used a mixed methods design (exploratory sequential) in which qualitative (emic) data were collected to develop a framework to define problematic khat use. The qualitative data were gathered through in depth interviews (N=13) and focus group discussions (N=34). By supplementing the emic experiences considered to constitute problematic khat use with an etic definition, DSM-5 criteria for stimulant related disorders, a structured questionnaire was developed. Subsequently a cross-sectional evaluation of 102 respondents was carried out. Respondents both for qualitative and quantitative study were selected through purposive sampling and snowballing methods. Qualitative data were transcribed and subjected to thematic analysis whereas quantitative data were analyzed using descriptive and nonparametric statistics.

Results: Khat use was acceptable socio-culturally and for functional purposes. However, even in these acceptable contexts there was a restriction to the amount, frequency and type of khat used, and in relation to the experience of the individual using khat and other personal characteristics. More specifically, khat use was considered problematic if there was: impairment (in social and occupational functioning); loss of control in the use of khat; and withdrawal symptoms when not using khat. Among the participants who use khat (n=102), 45.1% (n=46) used khat on a daily basis. The commonest indicators of problematic khat use endorsed by the khat users were loss of control over chewing (73.5%), continuing use of khat despite harm (72.5%) and efforts to avoid withdrawal from khat (61.8%).

Conclusion: Despite reported religious, sociocultural and functional benefits to the use of khat, those with defined problematic khat use have impaired mental health, and social and occupational performance. Comparison of these respondent defined indicators of problem behavior matched almost completely to the DSM-5 (etic-defined) understanding of problematic stimulant use. Although the findings have relevant clinical, research and policy implications, the study focused on users purposively identified. Future larger scale definitive studies are required to make concrete policy recommendations.

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