

Dependence Severity and Locus of Control Among Male Alcoholic Clients: A Correlational Study

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ABSTRACT

Background: Worldwide, Alcohol is the most generally abused substances, In Americans society, approximately 8.5 percent over 18 years old have an alcohol use disorder, in Iraq about 291 inpatient and 2990 outpatient male for the purpose of addiction treatment, that's number and increased statistics about alcohol use lead us to study the possible causes and may be the way to get treatment by studying the locus of control and the dependence severity of alcohol.

Aims: To assess the level of dependence severity, locus of control in male alcoholic clients. To measure the correlation among dependence with locus of control in male alcoholic clients. To find out the relationship between locus of control and client socio-demographic variables (age, education, employment and marital status) and clinical features (amount, duration, type of current admission, number of admission).

Methodology: A descriptive correlational design. A non-probability, purposive Sample of (70) clients. This study started from November/2021 to march/2022.

Result: the results show that 40% of alcoholic male clients with age group 30-39 years old who are urban residency 92.9%, 57.2% married, 41.4% of them are primary school, and 47.1% of them are employee, with sufficient monthly income 41.4%. With regard to duration of alcohol use 27.1% is reported 6-10 years on alcohol and 24.3% are seen among those with 1-5 years and 11-15 years duration and in relation to amount the finding refers that 47.1 of clients are consumed more than one litter per day of more than one type (42.9%). The majority of them reported they admitted to hospital spontaneously (voluntary admission) 97.1% for first time 65.7%. Male alcoholic clients show moderate dependency on alcohol. Showing low to moderate internal locus of control and moderate to high external locus of control. Dependence severity is associated with internal and external locus of control; the internal and external locus of control are associated with monthly income.

Conclusion: alcoholic male clients have a moderately dependence on alcohol, and the external locus of control are more dominant in their drinking behaviour.

Keywords: dependence severity, locus of control,

INTRODUCTION

Alcohol is a poisonous and psychoactive chemical that has the ability to cause addiction. Alcoholic beverages are a common element of many people's social lives in today's societies. This is especially true for persons in high-profile social contexts with cultural influence, both nationally and internationally, when alcohol is commonly used while socializing. It's easy to overlook or dismiss the physical and social consequences of drinking in this atmosphere.¹

Alcohol dependence is a chronic disorder, with a course of deteriorating and remitting like other chronic diseases, as diabetes and hypertension. The main challenge in the management of alcoholism is the avoidance of relapse to heavy drinking. The Tenth Revision of the International Classification of Diseases and Health Problems (ICD-10)² describes the dependence disorder as being a group of mental and behavioural phenomena in which the use of a substance takes on a much higher priority for a given individual than other behaviours that once had greater value³.

Alcohol use disorders (AUDs) are one of the most common mental illnesses. Alcohol use disorders were among the top five major causes of disability-adjusted life years in the 15–44 age groups (DALYs). According to the most recent global data, harmful alcohol use caused 3 million deaths worldwide, with the illness burden being higher in low- and middle-income countries (LMICs)⁴.

One of the most important psychological constructs studied in the literature is locus of control, which is concerned with the essential components of good health and well-being⁵.

The locus of control can be used to explain behaviour in terms of internal (individual responsibility) or external (outside causes, such as significant other people or chance) factors⁶. The disease model of addiction is characterized by a loss of control, Treatment groups' theory claims that "alcoholics" lack self-control and hence lack the ability to choose whether or not to take alcohol. This loss of control is seen as a personal choice and thus an internal one. This creates a significant issue in the field of alcoholism⁷ Locus of control tends to become more internal in the

course of treatment and is associated with treatment success; whereas external locus of control is considered as a risk factor for dropouts and the resumption of drug use. Fostering internal locus control of patients with drug addiction is thus a very relevant issue as a way to promote internal behavioral regulation⁵

METHOD AND MATERIAL

The study was conducted in the substance use rehabilitation centres at psychiatric teaching hospitals in Baghdad city; that include Ibn-Rshud Psychiatric Teaching Hospital and Baghdad Teaching Hospital, for the period from December 12th, 2021 to February 28th, 2022 after obtaining official permission from the hospitals.

Inclusion Criteria: Selecting the clients with alcoholism who are diagnosed by the psychiatrist as having alcohol use disorder.

Exclusion Criteria: Clients who refused to participate in the study and Clients who were diagnosed with any other primary psychiatric disorder, delirium tremens, complicated withdrawal and any personality disorders. And clients with complicated withdrawal symptoms.

Data Collection Procedure: After signing the protocol from the College of Nursing / University of Baghdad, the approval of the Ministry of Planning - the Central Statistical Organization was taken. Then the approval of the ethical committee was taken in the college. And the informed consent taken from the patient after interview and explain the purpose of the study.

Instrument of the study: The data was collected using sociodemographic, the clinical characteristics of the client, the Short form Alcohol Dependence Data Questionnaire (SADD)⁸, Drinking Related Internal-External Locus of Control Scale: (DRIE)⁹. A self-administered questionnaire was created, and by using structured interview for the clients that not able to read and write.

Data Analysis Procedure: The collected data was statistically analysed using SPSS software version 26. There were sections in questionnaire

Section 1: Demographics: Section 1 Had questions regarding demographics of the participants including age, and Residency, marital status, level of education, monthly income

Section 2: Alcohol Dependence Data Questionnaire (SADD): Section 2 Comprised of 15 items.

Scoring for Alcohol Dependence Data Questionnaire (SADD): these assessed by Never=1 Sometimes=2 Often=3 nearly always=4.

Section 3: Drinking Related Internal-External Locus of Control Scale: (DRIE): Section 3 Comprised of 25 items.

Score for (DRIE): the total score of the scale which is rated into three levels that are: Low= 0 – 8.33, Moderate= 8.34 – 16.67, High= 16.68 25.

RESULTS

Table 1: Distribution of Sample according to their Socio-demographic Characteristics

List	Characteristics	f	%
1	Age M±SD= 35.39±9.406	≤ 19 year	6 8.6
		20 – 29 year	11 15.7
		30 – 39 year	28 40
		40 – 49 year	19 27.1
		50 ≤ year	6 8.6
		Total	70 100
2	Residency	Urban	65 92.9
		Rural	5 7.1
		Total	70 100
		Unmarried	22 31.4
		Married	40 57.2
		Divorced	4 5.7
		Separated	4 5.7
		Total	70 100
		4	Level of education
Intermediate school	17 24.3		
Secondary school	8 11.4		
Diploma	7 10		
Bachelor	7 10		
Postgraduate	2 2.9		
Total	70 100		
5	Occupation	Doesn't work	13 18.6
		Free works	24 34.3
		Employee	33 47.1
		Total	70 100
6	Monthly income	Insufficient	16 22.9
		Barely sufficient	25 35.7
		Sufficient	29 41.4
		Total	70 100

f: Frequency, %: Percentage, M: Mean, SD: Standard deviation

This table shows that alcoholic clients are with average age of 35.39±9.406 years, in which the highest percentage is seen with age group 30-39 year.

Regarding residency, most of clients are resident in urban areas (92.9%) and only 7.1% of them are resident in rural areas.

The marital status shows that 57.2% of clients are married and 31.4% are still unmarried.

Relating to level of education, the highest percentage refers that clients are graduated from primary school (41.4%) and intermediate school (24.3%).

The occupational status refers that 47.1% of clients are working as governmental employees while 34.3% are working free works.

Regarding monthly income, 41.4% of clients are perceived sufficient monthly income, 35.7% perceive barely sufficient income, and 22.9% perceive insufficient income.

This table shows that average duration of alcohol use is 11.97±7.311 years in which 27.1% is reported 6-10 years on alcohol use and 24.3% is seen among those with 1-5 years and 11-15 years duration of alcohol use.

The finding related to amount of alcohol used refers that 47.1% of clients are consumed more than one liter per day of alcohol of more than one type (42.9%).

Regarding admission to hospital, 97.1% of alcoholic clients reported they admitted to hospital spontaneously (voluntary admission) for the first time admission (65.7%).

Table 2: Distribution of Sample according to their Clinical Characteristics

List	Characteristics	f	%
1	Duration of alcohol use M±SD= 11.97±7.311	1 – 5 years	17 24.3
		6 – 10 year	19 27.1
		11 – 15 year	17 24.3
		16 – 20 year	11 15.7
		21 ≤ year	6 8.6
Total	70 100		
2	Amount of alcohol	≤ 500 ml per day	20 28.6
		600 – 1000 ml per day	17 24.3
		1000 < ml per day	33 47.1
		Total	70 100
3	Types of alcohol	Beer	5 7.1
		Whisky	20 28.6
		Wine	15 21.4
		More than one type	30 42.9
		Total	70 100
4	Types of admission	Voluntary	68 97.1
		Involuntary	2 2.9
		Total	70 100
5	Number of admission	1	46 65.7
		2	13 18.6
		3	7 10
		4+	4 5.7
		Total	70 100

f: Frequency, %: Percentage, M: Mean, SD: Standard deviation, ml: Milliliter

Table 3: Assessment of Alcohol Dependence Severity among Alcoholic Clients

Dependence severity	f	%	M	SD
Low	16	22.9	37.69	9.918
Moderate	38	54.2		
High	16	22.9		
Total	70	100		

f: Frequency, %: Percentage

M: Mean for total score, SD: Standard Deviation for total score
Low= 15 – 30, Moderate= 30.1 – 45, High= 45.1 – 60

This table indicates that alcoholic clients are associated with moderate dependency on alcohol (M±SD= 37.69±9.918) in which more than half of them (54.2%) show moderate level of dependence severity.

Table 4: Assessment of Locus of Control among Alcoholic Clients

Locus of control	Internal		External	
	f	%	f	%
Low	20	28.6	7	10
Moderate	43	61.4	43	61.4
High	7	10	20	28.6
Total	70	100	70	100
Mean ± SD	11.23 ± 4.572		13.79 ± 4.549	

f: Frequency, %: Percentage

SD: Standard Deviation

Low= 0 – 8.33, Moderate= 8.34 – 16.67, High= 16.68 – 25

Table 5: Regression Analysis for Dependence Severity with Locus of Control among Alcoholic Clients (N=70)

Dependence severity Variable	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
Internal locus of control	-.233	.048	-.505	-4.824	.001
External locus of control	.233	.048	.508	4.859	.001

a. Dependent variable: Locus of control

This table reveals that there is high significant difference among dependence severity with internal and external locus of control at p-value= .001.

This table indicates that alcoholic clients show low to moderate internal locus of control (M±SD= 11.23±4.572) in which 61.4% of them show moderate level and 28.6% show low level

while they show moderate to high external locus of control ($M \pm SD = 13.79 \pm 4.549$) in which 61.4% show moderate level and 28.6% show high level.

Table 6: Correlation between Locus of control among Alcoholic Clients with their Monthly Income (N=70)

Income Variables	Correlation	P-value (2-tailed)	Significance
Internal locus of control	.428	.001	H.S
External locus of control	.427	.001	H.S

This table shows that there is high significant relationship locus of control (internal and external) with regard to clients' perceived monthly income at p -value = .001.

DISCUSSION

It has been known out of the analysis in table (1) that the high percentage regarding alcoholic male clients' age was 30-39 years old who are urban residency and they married, primary school level of their education, they employee with sufficient monthly income. In relation to clinical characteristics in table (2) the high percentage regarding duration was 6-10 years that drunk more than one litter per day of more than one type of alcohol, voluntary admitted for first time. A study conducted in Iraq to assess problem recognition, treatment readiness and need in client with alcohol use disorder at psychiatric teaching hospital in Baghdad, the study showed that the highest age group is (20-29) years old at 48.8% of them¹³. A study in Kenya show that 41.1% of respondents were aged between 26-35 years, 48.9% of respondent were single¹⁰. A study in India show that high percentage of study result was 81.5% of age group 25-50 years, married, more than 10th standard, employee, and living in rural area, age at starting alcohol consumption is more than 21 years ,for first time admission 77.8%¹¹. Alcohol user patients were high percentage of age group 36-50 years old, that living in rural area, and those who employee of education level of 9-12, with low socio-economic status that admitted more than 4 time¹².

Alcoholic male clients have a moderate level of dependence on alcohol as that table (3) revealed more than half of them (54.2%) show moderate level of dependence severity. Alcoholic male clients have a moderate to high external locus of control as showed in table (4) and low to moderate internal locus of control. Table (5) show that there is a statistically significant relationship between dependence severity and internal – external locus of control at p -value.001. That indicate the highly association between variable, and if the eternal locus of control increase the dependence severity increase. A study in India show that half (51.90%) have moderate alcohol dependence¹¹. Dependence severity increased with the increased in duration of alcohol use¹⁰. External locus of control is positively associated with external locus of control¹². This study support the finding of the current study which explain that as external locus of control increase , the chance of severity of alcohol use also get higher. External locus of control can cause sever alcohol dependence because these people have less control over their alcohol consumption

Table (6) represent that that there is a high significant statistically relationship among monthly income with internal and external locus of control. Sufficient monthly income and increased external locus of control will led to increase alcohol intake.

CONCLUSION

1- Alcoholic male clients have a moderate dependence severity of alcohol. And moderate to high external locus of control, low to moderate internal locus of control.

- 2- Dependence severity is affected by external locus of control and internal locus of control
- 3- The monthly income is only one of demographic data is correlate to the internal and external locus of control.

Recommendations:

- 1- Interventional programs with focus on shifting LOC from external to internal are likely to improve the healthy behavior of patient with AUD and aid in the recovery process.
- 2- Studies with a longitudinal design may be needed to further consolidate the findings from this study.
- 3- We suggest, in the clinical setting, professionals should prepare realistic treatment plans by reviewing patient characteristics (locus of control, and severity of alcohol dependence) and facilitate convert of external to internal locus of control to change drinking behavior and prevent relapse.

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