



Ethiopia STEPS Survey 2015

Khat Fact Sheet



The WHO STEPwise approach to surveillance (STEPS) is a simple, standardized method for collecting, analyzing and disseminating data on non-communicable diseases (NCDs) and risk factors. Data are collected on the established risk factors and NCD conditions that determine the major NCD burden, including khat use, tobacco use, harmful use of alcohol, unhealthy diet, insufficient physical activity, overweight and obesity, raised blood pressure, raised blood glucose, and abnormal blood lipids. Data from STEPS surveys can be used by countries to help monitor progress in meeting the global voluntary targets related to specific risk factors such as khat use, tobacco, alcohol, diet and physical inactivity. The khat indicators from STEPS can be used to evaluate and monitor existing tobacco-control policies and programs.

The STEPS survey on NCD risk factors in Ethiopia was carried out from April to June 2015. The STEPS survey in Ethiopia was a population-based survey of adults aged 15-69 years. A multi stage cluster sampling design was used to produce representative data for that age range in Ethiopia. Survey information was collected electronically using handheld devices. The survey was implemented by the Ethiopian Public Health Institute. 9,801 adults participated in the Ethiopia STEPS survey. The overall response rate was 95.7%. A repeat survey is planned for 2020 that depends on the availability of funds.

Highlights

KHAT USE

- 21.1% of men, 9.4 % of women, and 15.8% overall (1546 adults) were current users of khat
- 61.4% of men, 50.4% of women, and 58.4% overall (882 adults) were dialychew khat in the past 12 month.

CESSATION OF KHAT

- About 1 in 4 current khat chewers tried to stop chewing in the last 12 months.
- Less than 1 (7.5%) in ten current chewers were advised by a health care provider to stop chewing in the last 12 months

CO-OCCURANCE OF ALCOHOL AND SMOKE WITH KHAT

- 15.4 % of adults (280 adults) were current khat chewers who smoke while using khat.
- 6.6% of adults (99 adults) were current khat chewers who drink alcohol while using khat.
- 32.0 % of adults (535 adults) were current chewer³ who had friend smokes while using khat

Data presented in this fact sheet relate only to selected khat indicators. Additional information on khat or other NCD risk factors from the survey is available from sources listed below.

For additional information, please contact:

WHO STEPS Team [Steps@who.int]

STEPS country focal point name: Abebe Bekele Belayneh; email: abebe1277belay@gmail.com; 0910-50-58-15; 0112-13-35-72

*Khat questions are adopted from WHO Tobacco Questions for Surveys

Results for adults aged 15-69 years	Overall % (95% CI)	Males % (95% CI)	Females % (95% CI)
Khat Use			
Current khat chewer¹			
Current khat users	15.8 (13.1-18.5)	21.1 (17.6-24.7)	9.4 (7.2-11.5)
<i>Among chewers during the past 12 months, percentage of respondents who chew khat daily.</i>	58.4 (51.6-65.2)	61.4 (53.9-68.8)	50.4 (41.7-59.2)
<i>Mean age of starting khat chewing</i>	19.6 (19.1-20.2)	19.1 (18.5-19.8)	21.0 (20.0-22.0)
<i>Mean amount of bundle of khat used by current user</i>	1.5 (***)	1.7 (***)	0.9 (***)
Current non-khat chewer¹			
<i>Never users</i>	81.0 (78.3-83.7)	74.5 (71.0-78.0)	88.8 (86.5-91.1)
Family problem			
<i>Percentage of family/partner problems due to someone else's khat chewing</i>	1.3 (1.0-1.7)	1.5 (1.0-2.1)	1.1 (0.7-1.5)
Khat Cessation			
<i>Current khat chewers who tried to stop chewing in past 12 months</i>	23.9 (19.0-28.9)	25.9 (20.1-31.7)	18.7 (12.5-24.8)
<i>Current khat chewers advised by a health care provider to stop chewing in past 12 months²</i>	7.5 (5.2-9.7)	8.2 (5.4-10.9)	5.6 (2.8-8.3)
Co-occurrence of alcohol and smoke with khat			
<i>current khat chewers who smoke while using khat</i>	15.4 (12.2-18.6)	20.6 (16.3-25.0)	1.5 (0.4-2.6)
<i>Current chewer who had friends smoke while using khat</i>	32.0 (25.6-38.5)	39.0 (31.3-46.6)	13.4 (8.2-18.5)
<i>current khat chewers who drink alcohol while using khat</i>	6.6 (4.4-8.8)	8.7 (5.8-11.7)	1.0 (0.1-1.9)

¹Khat is a plant native to the Horn of Africa and the Arabian Peninsula. Khat chewing in Ethiopia is a social custom that dates back thousands of years. However, khat is a strong stimulant that causes mild to moderate psychological dependence, although not as strong as that of alcohol and tobacco, and its consumption can have serious health and economic consequences.

²Among those who visited a health care provider in past 12 months. Adults refer to persons age 15-69 years. Data have been weighted to be nationally representative of all men and women age 15-69 years.

**The confidence interval of mean number was not calculated due to the presence of high geographical variations, so that the extreme values affected the calculation of the interval estimation of the mean number of bundles of khat used daily. Technical assistance for the survey was provided by the World Health Organization (WHO). ³ To mean those who do not smoke currently but considered as passive smokers