# Alexithymia Among Drug Addicts

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#### **Abstract**

This study focused on the topic of "Alexithymia among drug addicts." The descriptive approach was adopted to conduct this study. A sample of 140 addicts was included from the intermediate center for the treatment of addicts in Chlef. Using the Alexithymia Scale (TAS-20), it was found that drug addicts have a high level of alexithymia. Based on these findings, several recommendations were proposed, with the most important one being to emphasize the emotional aspect in the psychological treatment of addicts and to consider it in the development of therapeutic, preventive, and rehabilitation programs to prevent relapses among addicts.

Keywords: Alexithymia, youth, addiction.

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# Introduction:

The problem of drug abuse and addiction is one of the health challenges faced by countries. It is rapidly and dangerously spreading among the youth. Its danger lies in the various patterns of depending on substances which would have an impact on the individual's mental and physical health. The latest global report issued by the United Nations Office on Drugs and Crime (UNODC) in 2018 indicated that approximately 31 million drug users worldwide suffer from substance-related disorders, with the majority being young people. In 2019, the same source found that 35 million individuals suffer from drug-related disorders and are in need of treatment.

In Algeria, reports from the National Office for the Fight against Addiction and Drugs for the year 2020 revealed that 64,321 individuals were involved in drug-related cases, representing an increase of 37.17% compared to 2019. Among these individuals, 11,644 were drug traffickers, and 28,339 were consumers of cannabis. As for psychoactive substances, the number of users reached 12,952 addicts, and the number of individuals involved in their trafficking reached 10,754. Additionally, the number of addicts seeking treatment at intermediate centers for addiction treatment during 2020 was 21,638, which decreased to 19,701 addicts in 2021.

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Cannabis is considered one of the most commonly consumed psychoactive substances in Algeria, ranking first with a percentage of 30.72%. It is followed by multiple drug use at 29.11%, and then psychoactive substances at 23.19%, occupying the third position (National Office for the Fight against Drugs and Addiction, 2021, p. 13).

There are multiple reasons and factors that contribute to addiction among young people. Many researchers have emphasized the importance of social factors related to the external environment, family, and treatment institutions in the occurrence of addiction. A study by Sabih (2006) identified key factors such as the external environment of the addict and the pressures they face in society and the family (Abeed, 2020, p. 48).

Family environment plays an essential role that cannot be overlooked in the occurrence of addiction. Factors such as dysfunctional family dynamics, absence of parents, and excessive protection, all contribute to interpersonal conflicts which result in addiction. A study by Asharma et al. (2012) confirmed that a lack of family support leads to relapse into addiction (Alkandari, 2014, p. 14).

Psychological factors, such as psychological susceptibility, are linked to addiction and the internal psychological structure of the individual. Psychological susceptibility refers to a set of internal traits that influence the formation of an individual's personality and their interaction with the external environment (Al-Hayaha, 2015, p. 38). Abu Zeid (1998) indicates the role of certain emotional, mood-related, and affective indicators in relapse, such as returning to compulsive behavior, self-regret, and the resurgence of psychological suffering, among other indicators that contribute to relapse (pp. 50, 51).

Barucq (2013) highlights the role of alexithymia as a risk factor that leads to addiction or as a factor that hinders psychological addiction treatment (p. 92). Several studies indicate that individuals with alexithymia are less likely to adhere to treatment and are more prone to relapses. Addicted individuals with high levels of alexithymia have difficulties integrating into psychological treatments (Palma-alvarez, 2021, p. 2). Furthermore, most chronic addicts have difficulty using internal discourse (discoursintérieur) and verbal self-regulation mechanisms for evaluating, planning, and guiding behavior (Miller, 1991, p. 278).

The study conducted by Loas et al. (1997) found that alexithymia is a predictive factor for relapse among alcohol addicts, particularly inasmuch as emotions are concerned, and it can contribute to treatment failure and poor outcomes. Similarly, a study by Moussaoui and Kiani (2019) revealed that increased alexithymia and impulsivity are associated with a higher number of relapses in addiction, while increased emotional intelligence reduces the number of relapses. Another study by Palma-alvarez et al. (2018-2020) indicated that the prevalence of alexithymia reached 41.3%, and addicts with alexithymia received shorter treatment durations and

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experienced early relapses compared to non-alexithymic patients, which affects and reflects on addiction treatment outcomes.

From this perspective, the following question was raised: What is the level of alexithymia in drug addicts?

# 2. Study Concepts:

#### 1. Alexithymia:

Definition: Sifnos defines alexithymia as a deficiency or poverty in affectivity, where the imaginative or fantasy life is impoverished due to a form of procedural or utilitarian thinking, with a tendency to use action to avoid conflicts and stressful situations, accompanied by a clear restriction in expressing emotions, especially difficulty in finding words to describe feelings (Jouane, 2006, p. 195).

Procedurally: These are the clinical indicators that drug addicts respond to through the use of interview guides, clinical observation, and the alexithymia scale (TAS-20).

#### 2. Addiction:

It is the persistent inability to control behavior, despite being aware of its dangers and the resulting consequences. Dependency is not limited to the addictive substance itself but also encompasses the relief (soulagement) it provides. Dependency is not solely based on the substance but rather on the experience it creates (Dortier, 2007, p. 8).

- 3- The methodological procedures of the study were as follows:
- 3-1. Research Design: The descriptive method was employed to achieve the study objectives.

#### 3-2. Research Instruments:

- **3-2.1. TAS-20 Scale**: The Toronto Alexithymia Scale (TAS-20) developed by Bagby, Parker, and Taylor (1994) was used. The scale consists of 20 items, and responses are rated on a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). The total score on the scale ranges from 20 to 100. The TAS-20 scale encompasses three dimensions:
- Difficulty Identifying Feelings (DIF)
- Difficulty Describing Feelings (DDF)
- Externally Oriented Thinking (EOT). (Al-Aidani, H. 2019, p 118).
- 3-2-2. The psychometric properties of the Alexithymia Scale (TAS-20): were verified by applying it to a sample of 100 drug addicts. The results were as follows:

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Validity: the reliability of the scale was verified through internal consistency assessment. The correlation coefficients between the items and their respective dimensions ranged from 0.52 to 0.84. Additionally, the correlation coefficients between the items and the overall scale ranged from 0.53 to 0.87. Furthermore, the correlation coefficients between the dimensions and the overall scale ranged from 0.56 to 0.85. These coefficients were statistically significant at a level of 0.05.

Reliability: The reliability of the scale was assessed using two methods: Cronbach's alpha and split-half reliability. The reliability coefficients obtained were 0.76 and 0.83, respectively. These coefficients indicate that the scale is reliable and consistent in measuring the construct of interest.

3.3. Sample: The study sample consisted of 140 addicts selected through random sampling from Al-Waseet Addiction Treatment Center in Chlef. The sample composition showed that males accounted for 82.9% of the participants, while females accounted for 17.1%. This gender disparity can be attributed to a higher demand for treatment among males compared to females. In terms of age distribution, the age group of 20-40 years constituted 70.7% of the sample, followed by the age group below 20 years at 28.3%. This can be attributed to the awareness of the 20-40 age group about addiction issues and their desire to overcome dependency. Regarding educational attainment, the majority of participants had a middle school level of education, followed by secondary education, then university education, and finally primary education. The respective proportions were 57.1%, 24.3%, 10.7%, and 7.9%. These results suggest a relationship between higher addiction rates and school dropout.

#### 4- Results of the Study:

**Presentation and Discussion of Question Results:** This question focuses on determining the level of alexithymia among drug addicts.

To answer this question, the mean and standard deviation were calculated, and the results are as follows:

Table (01): Level of Alexithymia among Drug Addicts

Variables		Arithmetic	Theoretical	Standard deviation
		mean	average	
Difficulty identifying feelings		30.52	21	1.28
(DIE)				
(DIF)				
D. (0. 1. 1. 1.		22.12	1 =	1.05
Difficulty describ	ing	23.13	15	1.05
feelings(DDF)				

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Externally	oriented	35.69	24	3.86
thinking(EOT)				
Alexithymia		89.45	60	6.51

Based on the table, it is evident that the level of alexithymia is high among drug addicts, both in terms of the overall score and the three dimensions (difficulty identifying feelings, difficulty describing feelings, and externally oriented thinking). Drug addicts have difficulty describing their emotions to others. They struggle to identify their own feelings, and their thinking pattern tends to be shallow, trivial, and lacking linguistic and emotional expression. They tend to focus more on describing events rather than engaging in emotional experiences where they have to share them.

These results are consistent with a study conducted by Abu-Shahba (1990), which found dynamic characteristics among heroin addicts in terms of high levels of depression and psychological suffering due to material and psychological frustration and feelings of inferiority (Rahal&chenaoui, 2019, p. 170). These results also align with a study by Majida Hussein Mahmoud (1991), which concluded that emotional instability and psychological distress, including isolation and other variables, can lead to relapse among recovering addicts (Ghanem, 2005, pp. 354-355).

One of the prominent clinical signs observed in addicts is the difficulty in describing and identifying emotions, both their own emotions and the emotions of others. They also exhibit a cognitive processing deficit in dealing with emotions. Additionally, there is a lack of emotional regulation and impoverished social relationships. (Crystal, 2002, p. 79) suggests the presence of an empathy disorder, which manifests as the inability to recognize the emotions and feelings of others among individuals addicted to alexithymia during interpersonal relationships (Guilbaud et al., 2002, p. 79).

It has also been observed that individuals with alexithymia experience psychological distress and rely on externally oriented thinking, leaning towards describing events rather than exploring their internal experiences. They often struggle with introspection, recalling dreams, encoding them, and connecting them to reality, indicating a deficit in introspection. This aligns with the perspective of Merleau-Ponty, suggesting that it is not merely about memory, perception, or vivid imagination, but rather an expression of repressed experience from an old past that does not want to be a part of the present (Hervé, 1998, p. 3). Indeed, the therapist often finds themselves facing a dull and underdeveloped discourse during sessions due to the psychological suffering experienced by addicts. Palma et al. (2020) emphasize that alexithymia has a negative impact on achieving therapeutic goals. Substance abusers with high levels of alexithymia face more difficulties in integrating into psychotherapeutic sessions, and therapeutic engagement with them

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tends to be weak (p. 2). In addition, individuals addicted to alexithymia often rely on primitive and immature defense mechanisms, which hinder the development of the therapeutic relationship (Boivier, 2016, p. 18). A study by Rahal and chanaoui (2019) on psychopathological tendencies among methadone addicts, based on a sample of 10 methadone users at the Algerian Center for Addicts Treatment, found that methadone addicts exhibit psychopathological tendencies that lead to relapse after recovery. These tendencies vary in their direction towards different psychiatric disorders from one addict to another and contribute to the failure of treatment programs (Rahal&chanaoui, 2019, pp. 182).

Furthermore, the majority of cases included in the study are polydrug addicts, which aligns with the findings of the study by El Rasheed that revealed a higher prevalence of alexithymia among addicts compared to non-addicts. It also found that individuals with alexithymia are more inclined towards multiple addictions, particularly opioids, rather than heroin. Additionally, they are less likely to seek treatment frequently and report relapse cases less frequently (El Rasheed, 2001, p. 1).

Understanding and interpreting the level of alexithymia among addicts goes beyond simply identifying the amounts of it in the addicts' system. It requires a comprehensive study of individual cases, shedding light on emotional performance and emotional abilities that vary from person to person. Additionally, it involves considering the role and impact of other factors such as family, society, and psychological factors, as well as the specific characteristics of each addictive substance. Luminet and Lenoir (2006) explain that scientific literature ought to discusses three fundamental emotional abilities: the ability to differentiate between emotions and facial expressions, the ability to recognize emotions verbally, and finally, the ability to express emotions verbally by connecting one's own emotions to those related to others. The development of each ability requires the acquisition of preceding capacities (p. 337).

#### Conclusion:

After studying the topic of "Alexithymia among drug addicts" using the descriptive method at the Intermediate Center for Addict Treatment in El Chlef, utilizing the Alexithymia Scale (TAS-20), it was found that drug addicts experience a high level of alexithymia. Indicators of this alexithymia include psychological distress, difficulty in identifying and describing emotions, a practical thinking style and a lack of hedonic lifestyle, diminished emotional engagement with difficulties in building social relationships, as well as anxiety, impulsivity, and longing for the psychoactive substance.

The results of the current study align with those of some previous studies (both foreign languages and Arabic) on the subject, while differing from others due to variations in theoretical approaches and orientations. Generalizing the study's findings remains contingent upon the

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limitations and scope of the research, especially regarding the sample variables (adults), the research location, and its circumstances.

Based on these results, several recommendations have been proposed, including:

- 1. Development of appropriate therapeutic programs that focus on the emotional aspect of the addict's personality, particularly those that encourage emotional expression and emotional awareness.
- 2. Enhancement and promotion of drug prevention programs in universities, considering the prevalence of modern addictive behaviors among students.
- 3. Development of drug control and crime prevention policies using modern technology and involving civil society in assisting young individuals in societal integration and personal development.
- 4. Collaboration among all stakeholders involved in addiction and relapse, including health, political, and economic organizations, with practical approaches to addiction treatment and relapse prevention. Comprehensive care should extend beyond medical and psychological aspects.

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