Epidemiology of Drug Use in Herat – Afghanistan

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Original Article

Abstract

Background: Drug addiction is one of the alarming public health and social problems in Afghanistan and around the world. Addiction denotes the habitual use or the physical or mental dependence on narcotic drugs or psychotropic substances.

Methods: Drug addicts who were admitted to six public addicts' rehabilitation centers in Herat, Afghanistan between March and July 2019 were recruited for this descriptive study. A total of 299 drug addicts were included in this study. A 77-item questionnaire containing three subscales: 39 items for personal information, 32 items for drug use, and 6 items for dependence and treatment subscale were validated and used for data collection. IBM SPSS Statistics for Windows v.22.0 was used for data analyses.

Findings: The median age of the participants was 30 years. Of all participants, 79.1% were male, 56.6% were illiterate, and 1.7% were university graduates. In this study, 44.8% of the participants used heroin, 20.7% used opium and 15.4% used methamphetamine. Almost half of the participants (49.5%) declared that at least one member of their families was a drug user. Of the 299 drug users included in this study, 64.9% stated that at least one person close to them (except family members) used drugs. Over two-thirds of the participants (78.4%) had easy access to drugs, 26.8% had broken laws for money/drugs at least once.

Conclusion: This study revealed that male illiterate teenagers living in low-economic nuclear families were more vulnerable to drug use in Herat, Afghanistan. The most common reasons for drug use were curiosity, peer influence, and seeking pleasure.

Keywords: Drug addiction; Prevalence; Heroin; Herat; Afghanistan

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Introduction

Drug abuse and addiction are among the most disturbing public health and social problems in the world. Addiction denotes the habitual use or the physical or mental dependence on narcotic drugs or psychotropic substances.[1,2]

In Afghanistan, the number of drug addicts has been rapidly increasing during the last two decades. In 2015, it was estimated that drug use affected almost 31% of Afghan households.[3] Although Afghanistan, as one of the world's leading drug producers, has spent more than US $ 10 billion on domestic drug control, it is not only a major exporter of drugs, but still one of the major drug users.[4,5] Many Afghan drug addicts started using drugs as self-medication against life suffering as painkillers and tranquilizers.[6] However, rather than easing the suffering and pain, addiction triggers worse misery such as health, social and behavioral problems[7].

A recent study conducted in drug addiction clinics in Kabul revealed that the mean age of addicts was 30.73 years, and 88.9% were male. Half participants were married, 60.5% lived in urban areas, 62.8% were refugees and 17.5% were unemployed. The mean age at starting drug use was 19.9 years. Addicts started drug use due to a friendship environment (36.6%) and to reduce trouble (22.3%). The most frequent substance used were cannabis (46.0%), opium (25.3%), and heroin (17.0%).[8] Poverty, unemployment, lack of awareness of the harmful effect of drugs, ongoing conflicts, sense of hopelessness, weak family ties, parents' negligence, peers and family pressure, role of media, stressful life events, and low economic status were among the most common causes of initiating drug use and drug addiction.[1,2,7-10]

This study aims to investigate the etiology of drug abuse and Sociodemographic characteristics of drug users hospitalized at public addicts' rehabilitation centers in Herat, Afghanistan. To our understanding, it is the first comprehensive study on determining the causes of drug use in Herat province and may serve as the template for future studies in this region.

Methods

Study design, place and duration of study: For this descriptive study, we recruited drug addicts who were admitted to six public rehabilitation centers in Herat, Afghanistan; between March and July 2019. Herat, the second most populated province of Afghanistan, is home to 2,095,117 people, including 1,039,149 males and 1,055,968 females.[11] It borders the Islamic Republic of Iran and Turkmenistan, both with a high prevalence of drug use in the region.

All six public drug rehabilitation centers in Herat city were included in this study. These include 120 beds for males, 110 for females and children, and 50 for teenagers. Data were collected at 4-month interval from all centers to ensure the discharge of the recruited patients treated for drug use.

Sampling procedures and eligibility criteria: All drug addicts who were hospitalized in the six addiction rehabilitation centers between March and July 2019 were the target group. Inclusion criteria included drug addicts, regardless of age, gender, occupation, and social background who intentionally cooperated in data collection and have resided in Herat for the past 5 years.

Exclusion criteria included those with advanced mental illnesses, unable to collaborate for any reason and those who did not give informed consent for the interview and data collection and the residents of other provinces of Afghanistan. A total of 299 patients treated at the six public drug rehabilitation centers were included in this study.

A questionnaire was developed based on the evidence-based literature by a group of neuroscientists and public health specialists. The questionnaire consisted of three subscales with a total of 77 items. The patients' personal information subscale consisted of 39 items, the drug use subscale consisted of 32 items and the dependence and treatment subscale consisted of 6 items.

Assessment of reliability and validity of the questionnaire: Prior to the initiation of this study, a pilot study of 18 drug users was conducted and the questionnaires were completed. Cronbach's alpha coefficient was performed for internal consistency, which resulted in values over 0.8 for all items. The correlation between each item and its own subscale was assessed to ensure convergent validity, which was considered acceptable only if it was above 0.5.

Discriminant validity was tested by comparing the correlation of each item and its own subscale with the correlation of that item with other subscales; this was acceptable when an item correlated more with its own subscale than any other subscales. Cronbach's alpha values for reliability, convergent validity, and discriminant validity of the instrument were within acceptable ranges.

Data collection: A group of fifteen medical students from Ghalib University conducted data collection.

All surveyors received an intensive two-week training in survey and data collection techniques both at university and in the field. Prior to the initiation of the research, an assessment was carried out to ensure consistent data collection method and to minimize inter-surveyors' variability. Data was collected from each participant confidentially by face-to-face interviews in separate and private rooms. The average duration of the interview was between 30- 40 minutes.

Ethical considerations: The study protocol was approved by the Human Ethics Committee of Ghalib University (approval Number: 477; 250218). Data were acquired from each participant after ensuring about privacy and confidentiality of the information and obtaining written informed consent. The required permits were also obtained from Herat Department of Public Health (Permit Number: 61; 160219). Statistical analyses: Data were analyzed using IBM SPSS Statistics for Windows v.22.0 (IBM Corp., Armonk, NY). Descriptive statistics were reported as mean ± standard deviation, and categorical variables were reported as frequency and percentages. The association between the two categorical variables was investigated with Pearson Chi-square test. Moreover, a stacked bar chart was used to illustrate the association. A p-value less than 0.05 was considered statistically significant.

Results

A total of 299 drug users were included in this study. The mean age of participants was 31.1 ± 12.9 years. The median age was 30 years. Four out of five of the participants (79.9%) were male, 56.5% were illiterate, and 1.7% had a university degree. Most participants (67.9%) were from nuclear families, with 28.1% and 12.0% showing their economic levels as bad or very bad respectively (Table 1).

Table 1. Sociodemographic characteristics of drug users interviewed at addiction rehabilitation centers in Heart (2019)

Sociodemographic Characteristics	n	%
Age group		
17 and younger	59	19.7
18-24	34	11.4
25-39	120	40.1
40-54	72	24.1
55 and over	14	4.7
Gender		
Male	239	79.9
Female	60	20.1
Educational Level		
Illiterate	169	56.5
Able to read and write	30	10.0
Primary school	35	11.7
Secondary school	38	12.7
High school	22	7.4
University	5	1.7
Family Type*		
Nuclear	203	67.9
Extended	84	28.1
Broken	11	3.7
No answer	0	0.3
Economic status (perception)		
Very good	6	2.0
Good	81	27.1
Average	92	30.8
Bad	84	28.1
Very bad	36	12.0
Total	299	100.0

*One participant did not answer the question

In this study, 44.8% of the participants were heroin users, 20.7% were opium users and 15.4% were methamphetamine users. More than two-thirds of the participants (78.6%) said they had easy access to drugs, 26.8% of the users had broken laws for money/drugs at least once. Almost half of the participants (49.5%) declared that they had at least one drug user in their family; of whom 35.8% were fathers, 25.0% were siblings and 10.8% were mothers. Furthermore, 64.9% of the participants stated that at least one person close to them (other than family members) used drugs, 46.9% of whom were their colleagues (Table 2).

Table 2. Perception on availability and acceptability of drug among drug users interviewed at addiction rehabilitation centers in Herat (2019)

	n	%
Type of drug*		
Heroin	134	44.8
Opium	62	20.7
Methamphetamine	46	15.4
Crack	28	9.4
Marijuana	21	7.0
Unspecified	8	2.7
Availability of drug *		
Very easy	162	54.1
Easy	73	24.4
General	25	8.4
Difficult	34	11.4
Very difficult	5	1.7
Ever broken law for money/drug *		
Yes	80	26.8
No	219	73.2
Anyone using in the family*		
Yes	148	49.5
No	151	50.5
Person using drug in the family†		
Father	53	33.5
Brother/Sister	37	23.4
Mother	16	10.2
Unspecified	52	32.9
Anyone using drug around (except family members) *		
Yes	194	64.9
No	105	35.1
Person using drug (except family members)‡		
Colleague	90	45.7
Employer/Chairman	15	7.6
Employee	6	3.0
Unspecified	86	43.7

* n=299
† The percentage was calculated from those who declared at least one family member using drug (n=158)
‡ The percentage was calculated from those who declared at least one person using drug around them (except family member; n=197)

Heroin was the most frequently used drug among males (48.7%) and females (35.6%). The second most commonly-used drug was opium (23.3%) in males and crack in females (27.1%). The least used drug in males was crack (5.2%) and marihuana in females (3.4%). A significant difference was observed in the use of different types of drugs among males and females (p<0.001; Table 3).

Heroin was the most preferred drug by participants of any age. Participants aged 17 years or younger tended to use marihuana more than other drugs as the second option (25.5%), while it was methamphetamine for participants aged 18-24 years (18.2%) and opium for those aged 25 years and above. No participant aged 40 or above reported the use of marihuana. A significant difference was observed in the preferred drugs used among participants according to age (p<0.001). According to participants' educational level, heroin and opium were the most commonly used drugs among participants who did not attend school (41.5 and 23.6%, respectively) and those who were students at high school or higher (64.0% and 16.0%, respectively). While the most commonly-used drugs in primary and secondary school students were heroin and methamphetamine (52.1% and 18.3%, respectively). No significant difference was observed between the use of different drugs according to educational level (p=0.215). Considering participants' economic level, heroin was the most commonly used drug in all participants, while opium was the second frequently used drug in participants with higher and lower economic status (17.4 and 26.7%, respectively). The second most frequent drug used by participants with average economic status was methamphetamine (22.5%). A significant difference was observed in the use of different types of drugs among participants with different economic levels (p<0.05). (Table 3).

Table 3. Type of drug by some sociodemographic characteristics of participants among drug users at addiction rehabilitation centers in Heart (2019)

	Type of drug (%)						
	Heroin	Opium	Crack	Meth[*]	Marihuana	Total	P
Gender							
Male	48.7	23.3	5.2	14.7	8.2	232	
Female	35.6	13.6	27.1	20.3	3.4	59	<0.001
Total	134	62	28	46	21	291	
Age							
17 and younger	41.8	14.5	10.9	7.3	25.5	55	
18-24	60.6	3.0	6.1	18.2	12.1	33	
25-39	47.0	20.5	10.3	19.7	2.6	117	
40-54	40.3	36.1	9.7	13.9	-	72	<0.001
55 and older	50.0	21.4	7.1	21.4	-	14	
Total	134	62	28	46	21	291	
Educational Level							
Unschooled	41.5	23.6	11.8	15.9	7.2	195	
Primary and Secondary	52.1	16.9	7.0	18.3	5.6	71	0.215
High school and higher	64.0	16.0	-	8.0	12.0	25	
Total	134	62	28	46	21	291	
Economic Status							
Very good and good	43.0	17.4	8.1	15.1	16.3	86	
Average	47.2	18.0	9.0	22.5	3.4	89	
Bad and very bad	47.4	26.7	11.2	11.2	3.4	116	0.006
Total	134	62	28	46	21	291	

* Methamphetamine

More than half of the participants (51.1%) said opium was the first drug they used; 23.0% used marihuana and 14.4% used heroin as the first used drug. Only 6.1% and 5.4% of participants used crack and methamphetamine as the first use, respectively. Of the 299 participants, 62.9% started drug use while they were in Afghanistan and 37.1% of them in Iran. Two-thirds of participants (67.2%) started drug use at home and 13.4% at their workplace. According to the age of onset, 37.3% started drug use in childhood, 34.8% at age of 18-24 years, and 24.0% when they were 25-39 years old. More than half of participants (55.5%) started drug use with their friends and only one-third (34.6%) used drugs with their family for the first time. The participants declared the first three reasons for drug intake were curiosity (34.4%), peer influence (29.8%) and working conditions (11.0%). Of the 299 addicts included in the study, 68.6% had positive feelings such as pleasure when they first used drugs, and 25.4% did not know the harmful effects of drugs before using (Table 4).

Table 4. The participants experience of use of drug for the first time (2019)

	n	%
Type of first used drug (n=278)		
Opium	142	51.1
Marihuana	64	23.0
Heroin	40	14.4
Crack	17	6.1
Methamphetamin	15	5.4
First country (n=299)		
Afghanistan	188	62.9
Iran	111	37.1
First place (n=299)		
Home	201	67.2
Workplace	40	13.4
Friends home	21	7.0
The place where drug was purchased	9	3.0
Other	28	9.4
Age of onset (n=287)		
17 and younger	107	37.3
18-24	100	34.8
25-39	69	24.0
40-54	9	3.2
55 and older	2	0.7
First experience with (n=263)		
Friends	146	55.5
Family	91	34.6
Single	26	9.9
Reason of drug intake (n=299)		
Curiosity	103	34.4
Peer influence	89	29.8
Working conditions	33	11.0
Sexual relations	16	5.4
Mental health problems	11	3.7
Financial problems	7	2.3
Unspecified	40	13.4
Emotion experienced first time (n=299)		
Pleasure	205	68.6
Regret	67	22.4
Interest in consuming again	11	3.6
Fear	8	2.7
Unspecified	8	2.7
Knowing about the harmful effects of drugs before using (n=299)		
Yes	76	25.4
No	223	74.6

Of all participants included in the study, 74.9% agreed that drug abuse was a public health problem in the country. To prevent drug abuse in the country, 54.6% of participants suggested punishment of drug dealers, 20.7% recommended education on harmful effects of drug addiction in

school, 12.4% stated that cultivation of drugs should be avoided in the country and 6.0% suggested enhancing security forces. Only 3.3% recommended the punishment of drug users and 1.3% stated that treatment policies needed to be strengthened (Table 5).

Table 5. Perception on drug use as a public health problem in Afghanistan by drug users at addiction rehabilitation centers in Heart (2019)

	n	%
Serious problem in Afghanistan		
Yes	224	74.9
No	75	25.1
Total	299	100
How to prevent drug abuse in the country		
Punishment for selling drugs	163	54.6
Education at school	62	20.7
Prevent cultivation of drugs	37	12.4
Enhance security forces	18	6.0
Punishment for using drugs	10	3.3
Strengthen treatment policies	4	1.3
Unspecified	5	1.7
Total	299	100.0

Discussion

This study was conducted to investigate the etiology of drug abuse and sociodemographics characteristics of drug users hospitalized in six public addicts' rehabilitation centers in Herat province in west of Afghanistan.

The mean age of participants in this study was 31.1 ± 12.9, and most of them (37.1%) started drug use when they were 17 years old or younger. This finding is similar to the results of a survey conducted in Kabul, Afghanistan, where the mean age of participants was 30.73 years.[8] Our result is also in accordance with the findings of a study conducted in Pakistan, in which the mean age of study participants was 33 ± 9.1 years, and the majority of participants initiated drug use in their teens.[9] We also found that 34.8% of participants started drug use between 18 and 24 and 24.0% when they were 25 to 39 years old. This result is similar to the findings of Farook et al., which the mean age at starting drug use was found to be 19.9 years.[8] A study from Iran also reported that the mean age of initiation of drug use among study participants was 20.66 years, ranging from 12 to 45.[12] Another study conducted in Pakistan stated that 61.0% of participants started using drugs between the ages of 20-30 years.[13] Another study from Iran reported that the mean age of participants at initiation of regular drug

use was 21.38 years.[14] This indicates that children and young adults are more vulnerable for initiation of drug abuse; hence, it is highly recommended to educate them about the harms of drugs.

Of the 299 participants in the study, almost half used heroin; it was the most commonly-used drug both in men (48.7%) and women (35.6%). This finding is in accordance with the results of two recent studies conducted in Pakistan.[9,13] Also, according to UNODS (2019), the most commonly-used opioid in Europe was heroin.[3]

Half of the drug users in this study were illiterate and only 1.7% were university graduates. This is in accordance with the findings of two studies conducted in Iran, in which 44.7% of participants were poorly educated,[12] or 31.8% of participants were illiterate[15] and a study conducted in Pakistan, in which 69.8% of participants were literate.[13] This suggests that illiterate people who are unaware of the harmful effect of narcotics are more likely to start using drugs. However, participants in this study were not randomly sampled from the addict population and a firm conclusion about the effect of literacy on drug abuse could not be made.

About four-fifths of participants in this study reported easy access to drugs. One-fourth of participants claimed that they violated the law

to find money to buy drugs. In fact, studies have shown that easy access to drugs is a strong factor in initiating drug use among adolescents.[16]

In this study, half of the participants (49.5%) stated they have a drug-using family member and two-thirds (64.9%) declared they had at least on drug-using friend around them. Similarly, a study conducted in Iran reported that 41.9% of the study participants had a drug-using family member.[12] This indicates that a drug-using family is a strong factor for initiating and maintaining drug use.

Participants declared that the three most common reasons for initiating drug use were curiosity (34.4%), peer influence (29.8%) and working conditions (11.0%). More than half of the participants (55.5%) stated they first used drugs with friends, at their own home (67.2%) or friends' homes (34.8%). More than 40.0% of participants stated they had bad or very bad economic status. Accumulated research suggests that lack of awareness about harmful effects of drugs, lack of family support, temptation by peers and family members, stressful life events, seeking pleasure, and low economic status are among the most common risk factors associated with drug addiction.[1,2,7-10] In this regard, a study conducted in Kabul found that most study participants started drug use due to friendship influence and to reduce trouble.[8] Three-quarters of participants in this study believed that drug abuse was a public health problem in the country. In fact, previous research has also proved that drug addiction has a devastating impact on economic development, and the society and public health.[10]

In this study, more than one-third of participants reported having a drug-using father and one-quarter stated they had an addict sibling, only one-tenth mentioned their mother was a drug addict. This suggests that a drug-using family could have been an influencing factor for drug addiction among study participants. In this regard, research has shown that temptation by peers and Family members has a great influence on among young adults.[10]

Despite popular belief that most drug addicts in Afghanistan began using initiating and maintaining drug use drugs when they moved to neighboring countries of Iran or Pakistan, this research demonstrated that almost two-thirds of participants initiated drug use in Afghanistan. This is alarming from a health and social perspective and requires targeted intervention to raise public awareness. In fact, research highlighted the fact that the level of knowledge and awareness of addicts about various aspects of addiction is low, and it is necessary to provide addicts with the information they require according to their individual needs.[17].

Conclusion

This study revealed that drug use remains a major public health problem in Herat, Afghanistan. Drug addiction in nuclear families and close friends as well as easy access to drugs are the main risk factors. Interventions should focus on raising awareness, and political commitment including agricultural interventions and strengthening barriers to easy access in the community must be addressed immediately.

Conflict of Interests

The authors declare no conflict of interest regarding the publication of this paper.

Authors' Contribution

NAS: Conceptualization, data curation, data analysis, investigation, methodology, supervision, writing-original draft, review and editing; ARN: Conceptualization, data curation, investigation, methodology, resources, writing-review and editing; HM: Conceptualization, Investigation, Data collection, data curation, investigation, writing-review and editing; HM Data collection, data curation, investigation, writing-review and editing; KWAS: Data collection, data curation, investigation, writing-review and editing; OD: Conceptualization, investigation, methodology, Data analysis, writing-review and editing; HO: Conceptualization, data curation, data analysis, investigation, methodology, supervision, writing-original draft, review and editing.

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اپیدمیولوژی مصرف‌کنندگان مواد مخدر در هرات– افغانستان

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	مقاله پژوهشی

چکیده

مقدمه: اعتیاد به مواد مخدر یکی از مشکلات نگران کنندۀ بهداشت عمومی و اجتماعی در افغانستان و جهان است. اعتیاد به اسـتفاده همیشگی یا وابستگی جسمی یا روحی به مواد مخدر یا روانگردان اشاره دارد.

مواد و روش‌ها: این مطالعه توصیفی بر روی بیماران معتاد بستری در شش مرکز بازپروری معتادان دولتی در استان هرات افغانستان در فاصله زمانی مارس تا جولای ۲۰۱۹ انجام شده است. در مجموع ۲۹۹ معتاد بستری شده در این مطالعه شامل شدند. یک پرسشنامه ۷۷ سؤالی شامل سه خرده مقیاس: ۳۹ سؤال برای خرده مقیاس اطلاعات شخصی، ۳۲ سؤال برای خرده مقیاس مصرف مواد و ۶ سؤال برای خرده مقیاس وابستگی و درمان اعتبار سنجی و برای جمع‌آوری داده‌ها مورد استفاده قرار گرفت. (v.22.0) IBM SPSS Statistics برای تجزیه و تحلیل داده‌ها استفاده شد.

یافته‌ها: میانگین سنی شرکت‌کنندگان ۳۰ سال بود. از مجموع شرکت‌کنندگان، ۷۹/۱٪ مرد، ۵۶/۶٪ بی‌سواد و ۱/۷٪ فارغ دانشگاه بودند. در این مطالعه ۴۴/۸٪ از شرکت‌کنندگان هروئین، ۲۰/۷٪ تریاک و ۱۵/۴٪ متامفتامین مصرف می‌کردند. تقریباً نیم شـرکت‌کننــدگان (۴۹/۵٪) اظهار داشتند که حداقل یکی از اعضای خانواده آن‌ها مصرف کننده مواد مخدر بوده است. از ۲۹۹ مصرف کننده مواد مخدر که در این مطالعه شرکت کردند، ۶۴/۹ درصد اظهار داشتند که حداقل یک نفر از افراد نزدیک به آن‌ها (به جزء اعضای خانواده) مواد مخدر مصرف کرده است. بیش از دو سوم شرکت کنندگان (۷۸/۴٪) دسترسی آسان به مواد مخدر داشتند، ۲۶/۸٪ حداقل یک بار قوانین پول / دارو را زیر پا گذاشته بودند.

نتیجه‌گیری: این مطالعه نشان داد که نوجوانان پسر بی‌سواد که در خانواده‌های هسته‌یی با وضعیت اقتصادی ضعیف زندگی می‌کنند، در استان هرات افغانستان آسیب‌پذیرتر در مورد مصرف مواد مخدر استند. شایع‌ترین دلایل مصرف مواد، کنجکاوی، تأثیر دوستان و لذت جویی بود.

واژگان کلیدی: اعتیاد؛ شیوع؛ هروئین؛ هرات؛ افغانستان

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