

Investigating the Causes of Youth Addiction to Drugs: A Case Study of Bamyan Center in 2024

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Abstract: The present study, conducted to examine the underlying causes of youth drug use in the central region of Bamyan province, aimed to explore individual, interpersonal-environmental, and social factors. From an objective standpoint, the research is applied in nature; methodologically, it is descriptive; and in terms of problem-solving, it adopts an interpretive qualitative approach. Data were collected through semi-structured interviews with 16 male participants, including 13 individuals with substance use disorders, one physician from the referenced hospital, and a psychology professor from Bamyan University specializing in the psychology of addiction. The findings revealed that individual factors—such as pride, the desire to relieve fatigue, curiosity, pursuit of pleasure, alleviation of severe physical pain, emotional detachment, pessimism, stress, mental health disorders, a positive perception of drugs, weak religious beliefs and values, and limited awareness of drug-related harms—played a significant role. Additionally, interpersonal-environmental factors—including the availability of drugs, peer influence, association with negative peer groups, school and living environments, the presence of inappropriate role models, romantic involvement, and unstructured leisure time—were influential. Social factors such as migration, political alienation, familial drug use, poverty, unemployment, strenuous labor, lack of recreational and service facilities, social instability, and weak law enforcement also contributed to youth drug involvement. Based on these findings, it is recommended that relevant authorities implement targeted interventions to address these multidimensional issues.

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INTRODUCTION

Addiction and drug addiction is a phenomenon that has gradually penetrated the fabric of human societies for six thousand years and has always had a destructive presence in human

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life. Part of history shows that most drugs have been used as medicine, and in other cases, it has been used to fill emotional-psychological gaps (Asadi, 2003).

Drug addiction, known as social disorder, is an unfortunate phenomenon and a scourge that consumes existence and lives. This destructive phenomenon leaves behind various devastations and causes the collapse of some values and cultural and moral standards, endangers the health of society, wastes millions of dollars of the world's capital, and causes unpredictable and immeasurable harm to individuals, families, and the entire global community. Every year, hundreds of people around the world die and are buried in the cold embrace of the earth (Stoudeh, 2010). Bamyan province in Afghanistan is not isolated from this global problem. Recently, Bamyan public health officials have added that they are witnessing an increase in the number of people with an addiction in the Bamyan center's addiction hospital. Currently, twenty people with an addiction are undergoing treatment in the Bamyan province's addiction hospital alone. However, observations indicate that the tendency to use drugs in Bamyan is greater than the figures mentioned. Also, during a scientific conference held in the center of Bamyan province for the drug eradication campaign at the headquarters of Bamyan University, one of the speakers at the meeting announced the establishment of another twenty-bed hospital in the Waras district of Bamyan province. He admitted that according to his reports, the number of addictions in Bamyan province is increasing (Akbari, 2023). Therefore, the issue of drug addiction among young people is one of the concerns of the people of Bamyan province, especially in the center of Bamyan, and the researchers considered it necessary to study this issue.

The results of this research will be used by young people, health workers, security agencies, teachers, professors, and parents, and they will gain knowledge about the causes of young people turning to drugs and their problematic and destructive use so that they can play a fundamental role in preventing drug use in various communities. Research in this field has also had numerous precedents, a few examples of which are mentioned here.

Zare et al. (2022) conducted a study entitled *Factors Affecting Drug Addiction Among Youth in Kabul City*, and the results of their study show that free time, inappropriate friends and peers, family violence and tensions, low literacy levels, economic poverty, lack of facilities and recreational places and standard parks are the leading causes of youth addiction to drugs.

Ahmadi (2023) presented the causes and consequences of drugs from the perspective of the religion of Islam in the first scientific research conference of Bamyan University under the title *Causes, consequences and Methods of Drug Treatment from the Perspective of the Religion of Islam, psychology, and sociology in Bamyan, Afghanistan*. He considered the main reasons for young people turning to drugs to be bad friends, poverty, unemployment, and family problems.

Tayyibi (2021), in his library research entitled *Youth and Addiction*, has concluded that the main reason for young people turning to drugs is age, unemployment, hard work, social disorder, curiosity about drug testing, lack of social adaptation skills, pessimism, stress,

mental disorders, having bad friends, positive attitude towards drugs, weak religious beliefs and religious values, lack of sufficient awareness about the harms of drugs and inappropriate patterns in the personal and family life environment. Mahdavi and his colleagues (2010) conducted a field study in Khorramabad, Iran, under the title of Causes and Factors of Youth and Adolescents' Tendency to use new drugs. The results showed that parental trauma, hedonism, addiction of family members, economic problems, bad friends, unemployment, place of residence, and family problems were the factors.

Saleh et al. (2012) conducted a field study entitled "Investigating the Relationship between Youth Lifestyle and Tendency to Use Industrial Drugs" in Shirvan, Iran, and the results showed that the causes of youth turning to drugs are lifestyle, leisure activities, location priority, and financial opportunities. Ebrahimi and Fattahi (2011), in their field study entitled "Investigating the Causes of Women and Youth Tendency to Use Drugs", discussed individual, family, and social causes. In their study of individual causes, they stated that emotional factors are a determining factor in drug use among adolescent women.

Babaei and Najafi-Asl conducted a qualitative study in Lorestan, Iran, in 2018, titled "Studying the Tendency of Rural Youth to Abuse Drugs", and concluded that the reasons for young people turning to drugs are unscrupulous peers, pride, abundance of opium, affluent life, the prevailing culture of opium consumption and even bringing opium to the landowners and elders at parties, addiction of family members, addiction of elders and elders in the village, and relief from fatigue. The results of Amirpour and Ghorbani's (2012) study show that the reasons for young people turning to drugs are curiosity, pleasure, family problems, lack of money and unemployment, severe physical pain, and lack of emotion.

Abdul-Malaki et al. (2015) also studied the presence of addiction in the family and its effect on individuals becoming addicted. He believes that an addicted older brother has a greater effect on pushing adolescents and young people to become addicted.

Amin Ali et al. (2009) also studied the effect of parental addiction on children's behavior in their studies. Based on the findings of their research, when parents use drugs, there is a greater likelihood that their children will also become addicted. According to the findings of Arqabai et al. (2018), an emotional void in children's relationships with their parents, especially their fathers, is one of the factors that predispose them to addiction.

Ahmadi (2023), in a study titled "Sexual Lifestyles and Social Status of Addicts in Bangladesh", concluded that young addicts with secondary education have low and medium incomes and that the severity of addiction among married men is higher than that of single men. He then discusses the effect of socializing with addicted friends on individuals' tendency to use drugs. Bagheri, citing Farahnaz Salehi Joonghani (2009), also concludes in her study titled "Studying the Effect of Socio-Economic Factors on Addiction" that the majority of people with an addiction have low economic and social status. There is also a significant relationship between the level of education of parents, income, level of isolation, level of failure in life, level of hope for the future, and addiction.

RESEARCH METHOD

This study employed an applied research method to generate practical insights for addressing addiction. In terms of its nature, the research was descriptive and qualitative and conducted in the field. The study was carried out at the Addiction Treatment Hospital in the center of Bamyan Province during the spring of 2024.

The statistical population included individuals directly involved with the phenomenon of addiction at the hospital. A purposive sampling technique was used to select 16 participants, comprising 13 individuals undergoing addiction treatment, one on-duty physician, one social worker, and one psychologist.

Data were collected through semi-structured interviews, allowing participants to express their experiences and perspectives openly. Each interview lasted between 30 and 50 minutes. Prior to data collection, informed consent was obtained from all participants. The interviews were conducted in Dari, audio-recorded with participants' permission, and transcribed verbatim. The Dari transcripts were later carefully translated into English to ensure accuracy and to facilitate analysis.

Data analysis followed an interpretive qualitative approach. Through systematic coding and thematic analysis, initial concepts and categories were extracted, interpreted, and organized to understand better the factors contributing to addiction. The qualitative interpretation enabled the exploration of participants' lived experiences and social contexts influencing addiction.

FINDINGS

The participants of this study were all men, each of whom had some experience of drug use and lived in the provincial capital of Bamyan. The instrument of this study was a semi-structured interview, and the participants expressed their thoughts and theories clearly during the interview. The interview lasted one month (from 3rd April to 4th May), lasting from half an hour to 50 minutes. This study was conducted with the participant's consent; notes were taken during the interview. Finally, the data was analyzed using a qualitative-interpretive method for two months.

Table 1: *Participants Demographics*

No	Name	Age	Sex	Occupation	Place
1	Gholam Ali	60	Male	free	Bamyan
2	Ali Shah	40	Male	free	Bamyan
3	Anwar	35	Male	free	Bamyan
4	Rashid	25	Male	free	Bamyan
5	Firozuldin	23	Male	free	Bamyan
6	Nazar Mohammad	40	Male	free	Bamyan
7	Golabudin	20	Male	free	Bamyan
8	Sarwar	21	Male	free	Bamyan
9	Sardar	28	Male	free	Bamyan

10	Ramin	26	Male	free	Bamyan
11	Ahmad Ali	26	Male	free	Bamyan
12	Shokrulah	29	Male	free	Bamyan
13	Nader	25	Male	free	Bamyan
14	Ashraf	35	Male	Hospital social worker	Bamyan
15	Asad	37	Male	Psychology Lecturer at Bamyan University	Bamyan
16	Ahmad	37	Male	Specialist or hospital doctor	Bamyan

These findings are categorized into three major factors contributing to youth drug addiction: individual, interpersonal-environmental, and social factors. Each is described below.

Table 2: Concepts and components extracted from the data

Concepts	Categories
Pride, relief of fatigue, sense of curiosity, enjoyment, relief of severe physical pain, lack of emotion, pessimism, stress, mental disorders, positive attitude towards drugs, weak religious beliefs and religious values, not having enough knowledge about the harms of drugs.	Individual factors
Availability of drugs, peers, having bad friends, school, room and place of residence, inappropriate patterns in personal life environment, falling in love and free time.	Interpersonal-environmental factors
Immigration, arrogant politics, family, addiction of family members, poverty, unemployment, hard work, lack of sports and recreational facilities, lack of service facilities, social disorder and insecurity, and non-compliance with laws.	Social factors

Individual Factors

Many young people fall into addiction due to personal curiosity, health issues, and the pursuit of enjoyment.

Ali Shah explained how he turned to drugs:

"When I was a teenager, I saw young people smoking cigarettes and started out of curiosity, wondering what it tasted like. Later, in Iran, I saw others smoking opium and wanted to experience it too. Eventually, I tried powder as well. This curiosity led me from cigarettes to opium and powder, and soon, I became addicted."

Nazar Mohammad described his experience:

"I had stomach pain and bloody diarrhea. Since I was far from a hospital, friends and elders advised me to take opium for relief. It worked temporarily, but I kept using it until I became addicted. My main reason for using opium was to ease my stomach pain."

Shukrullah shared:

"During adolescence, we would gather with friends in Bamyan, smoking cigarettes and drinking wine to enjoy ourselves. Later, we started smoking hashish and opium. One

day, when no one was home, a group of friends invited me over and introduced me to opium. We continued for several days, and when I moved to another area where opium was expensive, I switched to powder, becoming addicted in the process."

Ramin recounted:

"In Iran, I lived with other workers who said that those who didn't use drugs were miserly. Their words triggered a false sense of pride in me. I began smoking opium to prove I wasn't greedy and because I felt proud of my stable income. Eventually, I realized this pride had led me into addiction."

Social Factors

Nazar Mohammad linked his addiction to insecurity and trauma:

"I worked for an international organization and had a good standing. One day, my family was informed that my nephew was missing. Later that night, we learned he had been kidnapped. Despite paying ransom, he was murdered. I was devastated, unable to sleep or find peace. A friend suggested opium to help me sleep, and after taking it a few times, I became addicted."

Firozuddin shared a similar story:

"During factional wars in Bamiyan, my father and uncle were killed. I became the head of the family overnight, responsible for my mother, sisters, and relatives. While trying to support them, sadness consumed me. I first smoked cigarettes in a dining room to cope, then, with friends' encouragement, I turned to opium. When my sister found out, I stopped using it at home and continued at the shop. Now, I'm tired of this life and have decided to quit."

Psychologist Asad noted:

"Both extremes of family affection—too much or too little—can push young people toward addiction. Additionally, having addicted parents creates a behavioral model that normalizes drug use for children."

Ahmad, a physical therapist, added:

"Multiple factors contribute to addiction, including the use of psychoactive substances, emotional deprivation, mental health issues, lack of sports and recreational facilities, and inadequate service infrastructure. These factors often reinforce each other."

Interpersonal-Environmental Factors

Environmental conditions and peer influence also played significant roles in the participants' pathways to addiction.

Ghulam Ali described:

"During factional wars in Mazar-e-Sharif, drugs were readily available. Friends encouraged me to smoke opium, claiming it would keep me warm and reduce tiredness

in the trenches. Opium was even mixed into our food during cold winters. Regular use under these harsh conditions eventually led to my addiction."

Anwar explained:

"In Iran, at the age of 16–17, I was surrounded by friends who smoked. They offered me cigarettes, and later encouraged me to try opium. Gradually, smoking with them became a routine, and I became addicted."

Firouzuddin said:

"While working in Iran's quarries, my roommates smoked opium regularly. They divided the cost among all of us, and I had no choice but to pay. Eventually, I thought if I was paying for it, I might as well smoke it too. That's how I got addicted."

Nader recounted:

"I fell in love with my employer's daughter in Iran but was rejected and humiliated. This emotional pain led to sleeplessness, restlessness, and eventually, I turned to drugs for comfort."

Another participant mentioned:

"Working hard as a migrant laborer left me physically exhausted. To manage the pain and fatigue, I began using opium, and later heroin."

Ahmad Ali shared:

"I had a kolche bakery in Kabul. During Eid, we worked day and night to meet customer demands, with very little sleep. A friend suggested smoking opium to relieve fatigue. After trying it once, I became dependent and eventually addicted."

Social disorder, migration, family influence, and hidden policies were found to contribute significantly to youth drug addiction.

Ashraf, a hospital social worker, shared:

"According to addicts and their families, colonial and capitalist policies have fueled youth addiction. For instance, in 2016–2017, several female students at Asif Mayil High School and other schools in Kabul sold bolani and food to classmates. Soon after consuming their food, students became dependent, experiencing body pain and mood swings if they didn't eat it daily. Blood tests later revealed they had developed drug addiction. Investigations found that the food was deliberately laced with drugs. When the school administration tried to intervene, they were warned to back off. The involved students confessed they were part of a larger network assigned to addict teenagers across Kabul and other provinces by any means possible."

Rashid attributed his addiction to migration hardships:

"After graduating from high school, I migrated to Iran. Back home, my family provided for all my needs, but in Iran, I had no work skills, got physically exhausted, and was separated from my friends and family. The loneliness and tough labor made me emotionally drained. I deeply missed the warmth and kindness of my parents. In this vulnerable state, I fell into drug use."

DISCUSSION

The current study identifies the presence of unsuitable peers and role models in the social environment as a significant cause of drug use among young people. This finding is consistent with Shahabadi and Firuz's (2022) study, which identified several factors such as lack of recreational facilities, parks, violence, family conflicts, free time, unsuitable friendships, low literacy levels, and economic poverty as key elements driving young people toward drug use. The findings of the present study echo these concerns, particularly emphasizing how negative peer influence and the absence of suitable role models are central to the inclination of youth toward drugs. This indicates that the social environment plays a pivotal role in shaping behaviors, where young individuals may resort to drugs to cope with negative peer pressure or the lack of positive influences in their lives.

In addition to these social factors, the present study also highlights the importance of environmental factors such as the lack of proper living facilities, easy availability of drugs, and weak religious beliefs in contributing to youth drug use. These findings align with Ahmadi's (2023) research, which conducted an in-depth study in Bamyan and similarly pointed to socio-economic challenges, unemployment, family problems, and weak religious beliefs as primary drivers for youth substance abuse. Both studies underline the significance of the environment in influencing youth decisions, where inadequate living conditions, financial hardship, and the absence of strong spiritual or religious frameworks make young individuals more vulnerable to substance abuse. These socio-economic and spiritual factors must be addressed in any effort to reduce drug use, as they have a substantial impact on shaping young people's choices and attitudes toward drugs.

Moreover, the findings of the current study suggest that the interplay between hard labor, poverty, unsupportive religious beliefs, and unfavorable peer relationships influences young people's inclination toward drug use. This echoes Tayyibi's (2021) research, which highlighted similar determinants, including unemployment, hard labor, social disorder, curiosity about drugs, lack of social adaptation skills, mental health challenges, negative peer influence, and weak religious beliefs. The consistency of these findings reinforces the notion that youth drug use is often the result of multiple interconnected factors. Economic hardships, social instability, and emotional stress can erode young people's resilience, leading them to seek escape from drugs as a means of coping. These studies also show how vital it is

to create a supportive environment that provides healthy coping mechanisms and addresses underlying mental health and social issues.

Further reinforcing the findings of the present study, Mahdavi et al. (2010) explored the causes of drug addiction among young people in Khorramabad, Iran. Their research identified hedonism, family member addiction, financial difficulties, unfavorable friendships, unemployment, personal motives, and emotional factors as the main causes of drug addiction. The findings from the current study align with these results, especially regarding the impact of financial hardship, negative social relationships, and emotional instability. However, the present study offers a deeper understanding by revealing additional contextual factors such as insecurity, combat zones, kidnappings, family member murder, and romantic relationships. These unique factors, particularly pertinent to conflict-affected regions, underscore the complex relationship between socio-political instability and drug addiction. In regions where security concerns and trauma from violence are prevalent, young people face additional stressors that may push them further toward drug use as a coping mechanism.

The current study's identification of insecurity, combat zones, kidnappings, family member murder, and the impact of romantic relationships as contributing factors is a significant addition to the existing literature. These findings highlight the specific vulnerabilities faced by youth in conflict-ridden areas and provide new insight into the multi-faceted nature of drug addiction. While existing studies focus on economic, familial, and social factors, this research highlights the emotional and psychological toll of living in unstable environments. The constant exposure to violence and insecurity appears to exacerbate the risk of drug abuse, as young people in such settings may feel trapped or powerless in the face of these overwhelming challenges.

CONCLUSION

While this research may not provide a comprehensive solution to all the issues related to drug use, it offers a rational and unbiased approach to addressing the problem. Drug addiction remains one of the most pressing challenges facing societies worldwide, causing extensive harm and loss. The issue of addiction extends beyond individual suffering, as it often leads to criminal behavior and serves as a catalyst for other social problems. In this regard, the findings from Bamyan are not unique, and public health officials should prioritize addressing addiction within the province.

The research identifies several key factors contributing to drug use among young people. Individual factors include a positive attitude toward drugs, a lack of religious values, a sense of pride, a desire for pleasure, the need to relieve physical pain, mental disorders, pessimism, stress, and ignorance of the harms of drugs. Interpersonal-environmental factors include the availability of drugs, negative peer influence, unsuitable social environments, and factors related to personal life, such as falling in love. Social causes include immigration, political instability, family addiction, poverty, unemployment, hard labor, lack of recreational facilities, social disorder, and non-compliance with the law.

These findings point to the need for targeted interventions that address the socio-economic, familial, and psychological factors contributing to drug use, especially in regions affected by conflict and instability.

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