

Assessment of the Level of Awareness and Practice About Drugs and Their Harms Among University Students in Kabul Afghanistan

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Abstract

Aim: The purpose of this research is to investigate the level of awareness of drugs and their harms among the students of Kabul University, Kabul Medical University, and Meshaal University using a cross-sectional analytical method.

Research method: This research is a cross-sectional analytic study with a non-probability sampling method called quota sampling or sampling based on quotas in the fall of 1401 among the students of Kabul University, Kabul Medical University, and Mashal University. The resulting data have been analyzed using SPSS 26 software.

Research results: In this study, out of a total of 416 people selected to participate in this research, all of them showed satisfaction. In this study, the average age of participants was 21; the youngest was 16; and the oldest was 30. 20.9 percent were in the age range of 22 and 87 percent were single. Father's education level: 31.9 percent of bachelor students, 30.9 percent answered that their mothers are not literate, and 90.3 percent of the participants had information about drugs. In this study, most of the participants (60.3%) had average knowledge. Men had a good awareness of women. The relationship between the level of awareness and gender was proven to be statistically significant (P value = 0.00). Those whose father's education level was up to a doctorate or master's level had 0% poor knowledge, and the relationship between knowledge level and father's education level was statistically significant (P value = 0.02). The students who are in the age range of 16 to 20 had less good knowledge (12%), so with increasing age, the knowledge also increased. The relationship between the level of knowledge and the level of education of the mother was not statistically significant (P value = 0.06).

Conclusion: According to the results of this study, we found that the level of awareness of drugs and their harms among the students of Kabul University, Kabul Medical University, and Meshaal University was average. Which highlights the importance of educational programs, and various seminars related to drugs and their harms in universities.

Keywords: awareness of kabul university; kabul medical university; meshaal university; drugs; harm

Introduction

Drug abuse and misuse of drugs pose significant challenges in developing countries that affect public health, social stability, and economic development. This chapter examines the prevalence, patterns, and effects of drug abuse and misuse in developing countries and highlights achievements, challenges, and recommendations. Research findings show the widespread nature of drug abuse, including the abuse of prescription drugs. Socio-economic factors, health consequences, and social and economic costs contribute to the complexity of the issue. Limited resources, stigma, weak surveillance systems, and cultural barriers pose challenges to prevention and management efforts. Recommendations include integrated approaches, capacity building, collaborations, and international support. Strengthening healthcare systems, research, and data

collection are essential for evidence-based interventions. Addressing drug abuse and misuse requires a comprehensive and culturally sensitive approach that considers social factors and promotes community participation [1]. About 350,000 people die every year due to alcohol and drug use. Almost 47% of these deaths are caused by drug use [2]. It is estimated that 4% of deaths worldwide are caused by the harmful use of alcohol, killing 2.5 million people annually. Of all male deaths, 6.2% are due to alcohol use, compared to 1.1% of female deaths worldwide. Annually, 320,000 adolescents die from alcohol consumption, and 9% of all deaths from this age group are reported worldwide. The key underlying diseases that ultimately contribute to the worldwide burden of disease associated with chronic substance use are psychoactive substance dependence disorders [3]. Drug abuse is a serious issue that destroys the

dreams of our future generation. Young people are the most vulnerable due to the influence of mass media and television. Some young people and even adults become involved in drug abuse and illegal trafficking due to conditions such as poverty, family problems, moral deterioration, and bad behavioral adjustment. Substance abuse reduces a person's productivity and challenges the sense of security, love, and peace in society. One of the key impacts of illicit drug use on society is the negative health consequences experienced by drug users. Drug users are more prone to high blood pressure, depression, HIV, and mental illnesses. Drug use also imposes a heavy financial burden on individuals, families, and society [2].

Impact of drug abuse on society there is often a strong correlation between unemployment and drug use habits, both in developed and developing countries. There is also a link between drug use and low productivity and accidents. In general, increased drug use can also affect the safety of a community [2]. Drugs can also increase the likelihood of many criminal activities in developing countries. Violent clashes between rival smuggling groups can become problematic. Those who need money to feed their drug habit may turn to robbery, theft, and prostitution [2]. The use of substances by students can lead to harmful effects that reduce academic performance and increase the risk of sexually transmitted infections after intoxication. The use of alcohol, especially in large doses and when combined with other drugs such as khat and tobacco, is a serious risk to many people's lives. Drug use by parents and close friends, gender, religious beliefs, and an individual's lack of trust in others were associated with drug use in several studies among adolescents. The burden of drug use comes from a variety of sources, including parents, school teachers, and the police, with extensive media coverage of related crime [3]. In Afghanistan, drug addiction has been considered one of the most important health and social crises in recent years, considering the world's source of poppy production on the one hand and the consequences of three decades of war, such as unemployment, lack of strategic treatment programs, and lack of drug awareness programs. And the likes of it, this problem makes its shadow heavier on the country every day. According to the latest report of the United Nations Office on Drugs and Crime, Afghanistan has one of the highest rates of drug use [4]. Drug use has been recognized as an important public health problem in

Afghanistan. The importance and urgency of research can be understood with a little reflection and consideration, taking into account the figures available at the national and regional levels. In the past, drug use was mostly reserved for people over 50 years of age. The use of drugs has reached the age of 20 years and today the age of starting to use these drugs has reached the period of adolescence and even adolescence [2]. Effects of drug use on education. Youth who become addicted to drugs may suffer from mental disorders, short-term memory loss, and even sensory dysfunction. All of these problems, combined with the addiction itself, contribute to poor academic performance and low self-esteem. Low self-esteem may lead to depression or even greater substance dependence. This is a vicious cycle for our youth [2]. We have conducted research under the title of "Students' awareness of drugs and their harms" in order to reveal some of the facts of this sinister phenomenon and to fulfill my responsibility towards our nation.

Material and Methods

Type of Study

This study is an analytical cross-sectional study, and this study is also practically a basic study: quantitative in terms of the quantitative study question, preliminary in terms of obtaining information, and descriptive in terms of its purpose.

Research Location

The study was conducted at two Afghan public universities and one Afghan private university: Kabul Medical Sciences University (Abu Ali Ibn Sina) located in District 3, Kabul University in the third district of Kabul City, and Mashal University located in District 10 of Kabul City. According to the report of the Database Student Affairs Department in the above universities, the total number of female and male students at Kabul University of Medical Sciences (3,467), including the number of male students (1715), makes the total number at Kabul University (22,137) Female and male students, including the number of male students (11622) and a total number of 1200 students at Mashal University in 1401, have different medical and non-medical faculties.

Duration

The study was conducted within seven weeks starting in the third week of October 2022 until the fourth week of December 2022.

Sample Technique

In this study, non-probable, non-*rendezvous*, and quota sampling were used. The total number of samples from three universities was 26,804, and using Software Epi Info, Edition 7.2.5, with an expected frequency of 50%, a 95% confidence interval, and a standard error of 5%, a sample volume of 379 ($n = 379$) was selected, but a 10% ($n = 30$) non-response sample volume was finalized. Then, for each university, a specific quota was assigned: 84% (341) to Kabul University, 43% (178 males) and 39% (163 females); to Kabul Medical University, 13% (54), which is among them 6% (24 males) and 7% (30 females); and Mashal University contributed 5% to male and female groups (21), and the questionnaire was distributed to available samples in the mentioned universities.

Participants

The target population in this study included all female and male students of Kabul University of Medical Sciences, Kabul University, and Mashal University; the total number of these universities, according to the statistics of the database student affairs department, was 1401, including 3465 male and female students in the medical university, 22137 male and female students at Kabul University, and 1200 male and female students in total. The source population includes first- to fifth-grade students of medical and stomatology faculties and first- to fourth-grade students of public health, nursing, midwifery, and complementary health sciences faculties. The study population is those who participated in the study based on the quotas of the three universities (416).

Sample Size

The sample size from the target population, (26804) using Software Epi Info, Version 7.2.5.1. with comment expected 50% frequency, 95% confidence interval, and 5% standard error 379 students were selected by considering 10% (31 people) of non-response the sample size was 416 students out of 26804.

Data sources and measurement

The tool and source of information were used to investigate the level of drug awareness and its harms. A related standard questionnaire was derived from a review of the works published in PubMed and included 5 sections (demographic characteristics, drug awareness, drug harms, physical and psychological effects of drug abuse, and drug use

among students). Demographic characteristics have seven questions; the second part of drug awareness has four questions; the third part has ten questions; the fourth part, which deals with the physical and mental effects of drugs, has four questions; and the fifth section, which is the rate of drug use among students, has one question. In the harm section of drugs, a total score of 29 was given for each correct answer and 0 for each wrong answer. If their scores are 0–9, 10–19, and 20–29, respectively, they have low, moderate, and good knowledge [5].

Data Analysis Methods (Statistic Methods)

After completing the data collection stage and completing the determined number of questionnaires, the related database in SPSS version 26.0 was arranged and data entry of all questionnaires was done in the software, descriptive statistics and chi-square were used for data analysis.

Ethical Consideration

The proposal of research along with the questionnaire, was submitted to the public health faculty Institutional Review Board prior to the distribution and interview, and the IRB was obtained from the public health faculty research committee, an informed consent letter was obtained from each participant prior to their participation. We have never written the names of participants, the process of study conducted regarding the obtained IRB and university policies, and all the ethical issues have been considered according to the declaration of Helsinki.

Result

Demographic Specifications

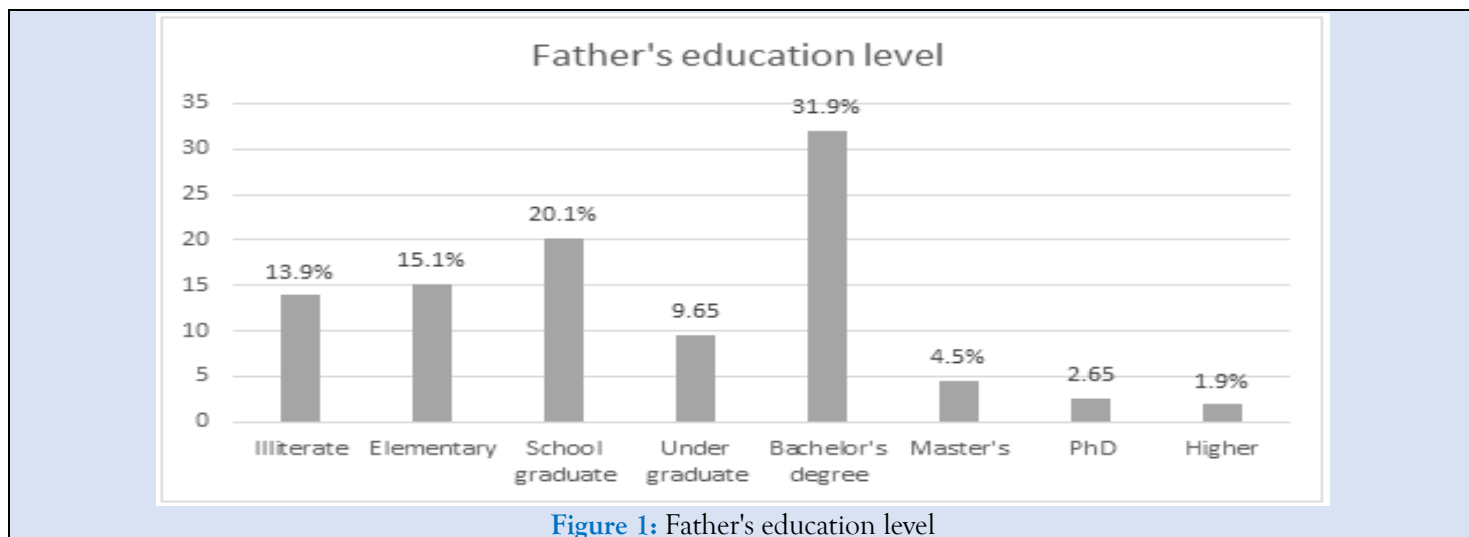
In this study, the average age of the participants was 21 years, and the standard deviation was 2.8. The lowest age of the participants was 16 and the highest was 30. The highest number of participants was 20.9 (87) in the age range of 22 and 87 percent (362) single participants, 51 percent male and 49 percent female. Of the 416 students who responded to the study, 22.1% (92) were first-grade students, 18.5% (77) were second-grade students, 29.1% (121) were third-grade students, 28.4% (118) were fourth-grade students, and 1.9% were fifth-grade students. 87% of the population in this study is single, and 13% of the rest are married. In the present study, most of the mothers (39.9%) are illiterate and the education level of most of the fathers (31.9%) is a bachelor for more information, refer to figures 1 and 2.

Table 1: Age of Participants.

Average limit	21
Frequency	22
Standard Deviation	2.2
Lowest age	16
Highest age	30
No response	4
Total	416

Table 2: Age of Participants

class	Frequency	Percentage
First	92	22.1
Second	77	18.5
Third	121	29.1
4th	118	28.4
5th	8	1.9
Total	416	100.0
Gender	Frequency	Percentage
Man	212	51.0
woman	204	49.0
Total	416	100.0
Marital status	Frequency	Percentage
married	53	12.7
single	363	87.3
Total	416	100.0



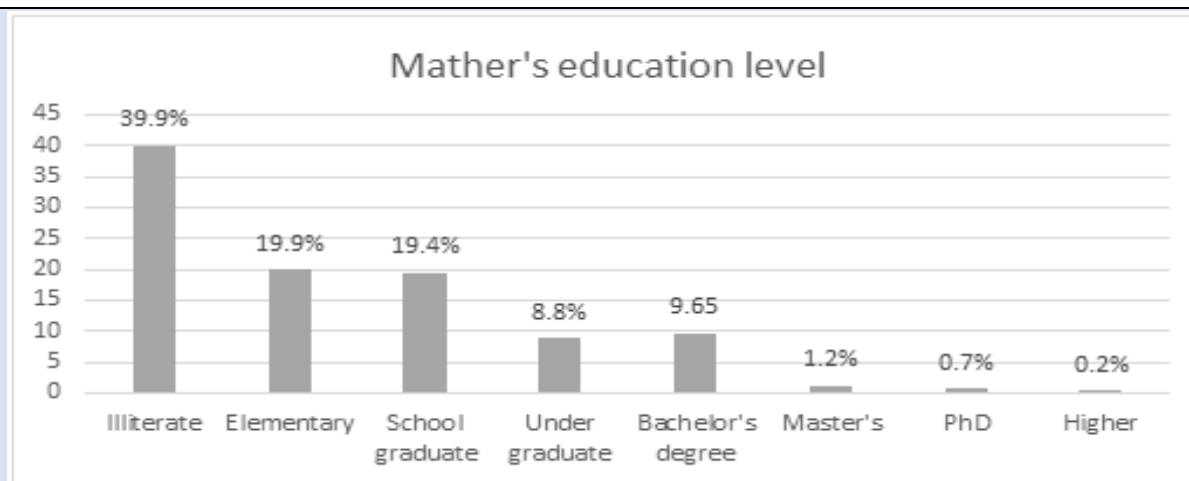


Figure 2: Mather's education level

Drug Awareness

Figure 3 shows the percentage of students who had information about drugs in this study: 90.3% of the participants had information about drugs, and the rest had no knowledge. The result showed that Students were asked which way they learned about drugs, the most participants (30.4%) had received information via television and radio, and the least had received information through their families. (For more information, see the table 3.) 11 types of

materials that students were asked which of the following materials were used by university students, the results of which showed that the highest number of participants responded that they believed that most students used 21% of tobacco products, cigarettes, pans, hookah, etc. and the lowest of them were heroin (3.8%). (See Table 4 for more information) The results show that 42% of students answer that drug and alcohol use causes moderate consumption of money, 39% answer that to a large extent, and 7% answer that they spend money to a high extent.

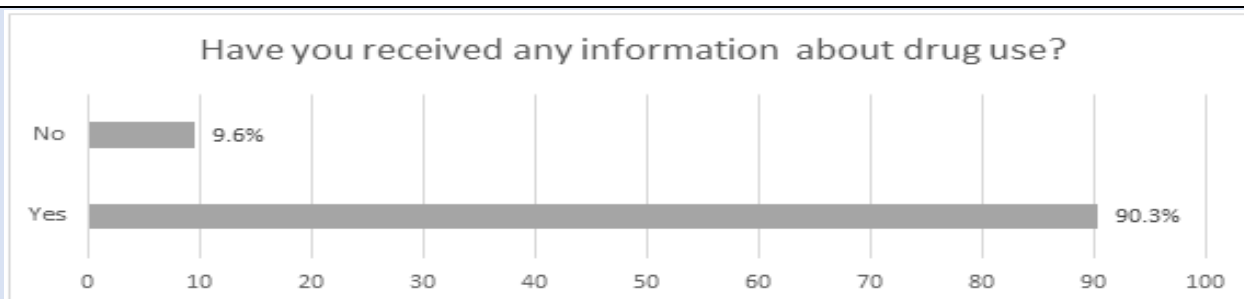


Figure 3: Have you received any INFORMATION ABOUT drug use?

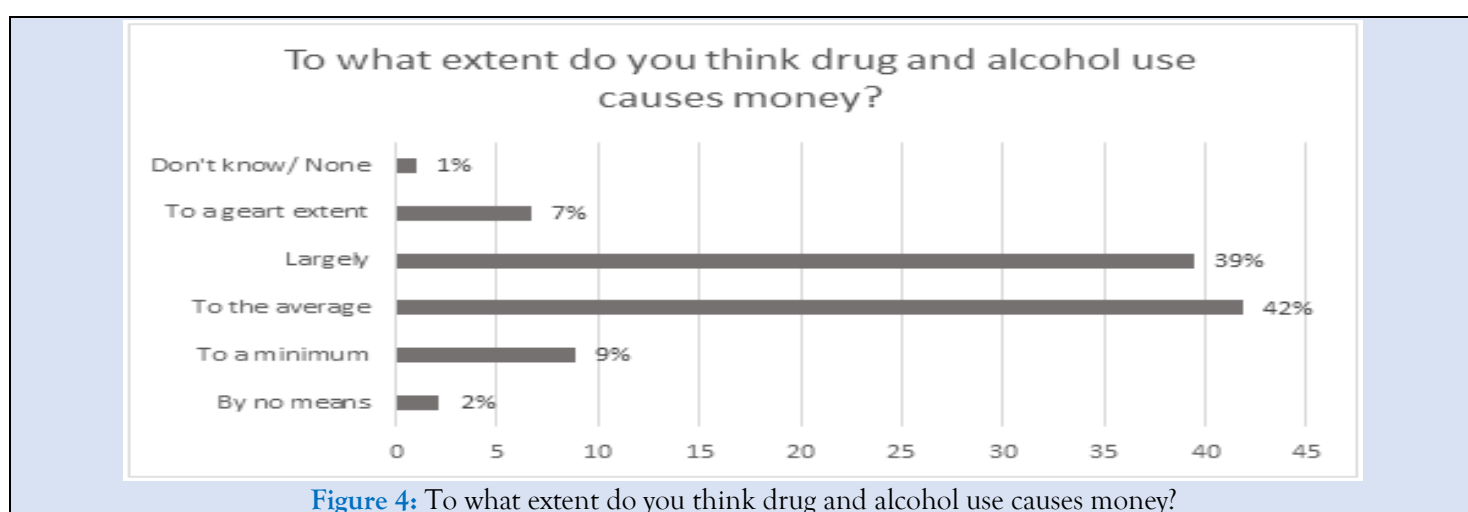
Table 3: Through which options have you received information about drug use?

	Frequency	Percentage
Family	87	13.4%
Friends	96	14.8%
Online Search	91	14.0%
Television Radio	197	30.4%
Educational Materials	178	27.4%
Total	649	100.0%

substances used by university students

Table 4: What do you think university students are using? (Choose more than one option)

	Frequency	Percentage
hashish	178	12.4%
Opium	66	4.6%
Heroin	54	3.8%
Pregabalin Tablet	210	14.6%
Tobacco Products Cigarettes ban Hokan	301	21.0%
Sleeping spices	113	7.9%
Pain reliever spices	80	5.6%
K Tablet	185	12.9%
Steroids	98	6.8%
Anti-Anxiety spices	90	6.3%
Over the counter drug get high	58	4.0%
I don't know	9	2.2%
Total	1434	100.0%

**Figure 4:** To what extent do you think drug and alcohol use causes money?

Awareness of Drug Harms

Table 5 shows that most participants were 32.6% aware of the harms of drugs on radio and television, and the least number of them were aware of the harms of drugs in the university environment, which was 4.4%. there are 12 types of substances that are harmful and have five options (from no starting limit to the highest level). In this study, most students have responded that the following drugs are very harmful to a great extent. (See Table 6 for more information.) There are 12 types of substances, students were asked how far university students were using drugs; they had five options (no starting limit to the highest level), the majority of participants were not aware of the study and answered that they did not know how much students were using these substances, and most of the students answered that students were using tobacco

products. (See table 7 for more information.) Table 8 includes 12 substances that cause addiction, the most participants (11.3%) responded that the tablet (K) is the most addictive. And as a result of the sometimes low 3.3% of students who wrongly answered that the spice of height growth is addictive, (See table 8 for more information.) In table 9, 12 addictive substances were asked about by students and had 5 options (from no start to high level), in this study, most students answered that the majority of the following substances are addictive at a high level. (See table 9 for more information.) In Table 10, students were asked what the 16 major factors were that the person was bringing to the drug. In this study, the results show that the majority of participants (7.4%) who seek happiness and easy access to drugs play a role in drug trafficking. (See Table 10 for more information).

Table 5: Have you received information about the harms of drugs? If yes in which way

Have you received information about the harms of drugs? If yes in which way		
	Frequency	Percentage
University Walls	34	4.4%
Family, friends	161	20.9%
Radio and TV	252	32.6%
Online Search	69	8.9%
Educational Materials	167	21.6%
Seminars	89	11.5%
Total	772	100.0%

Table 6: How harmful do you think the following drugs are?

	No limit	To a low extent.	To a moderate extent	To a large extent.	To a very large extent	I don't know	Total
Tobacco Products (cigarettes, Hokaan, ben)	2.4%	12.5%	19.2	27.2	33.7%	4.8%	100%
hashish	2.6%	3.8%	12.3%	31%	44%	6%	100%
Opium	1.9%	4.1%	5.3%	19.7%	61.3%	7.7%	100%
Heroin	2.4%	1.9%	2.6%	17.3%	68.3%	7.5%	100%
Pregabalin Tablet	1.9%	2.6%	6%	18.8%	59.1%	11.5%	100%
Alcohol	2.9%	2.6%	3.4%	18.8%	63.2%	9.1%	100%
Amphetamines	2.4%	2.2%	3.1%	13.9%	65.4%	13%	100%
Ketamine (for inducing and maintaining anesthesia)	2.2%	5.3%	8.7%	17.1%	46.9%	20%	100%
K Tablet (MDMA)	1.7%	2.9%	7.9%	21.4%	58.8%	12.8%	100%
Steroid or human growth hormone (for bodybuilding)	1.7%	9.4%	20.0%	17.5%	34.4%	17.1%	100%
Use of non-prescribed sleeper spices	1.7%	12.7%	20.4%	18.5%	31%	15.6%	100%
Non-prescription pain reliever spice use	1.4%	9.9%	18.8%	24%	30.3%	15.6%	100%

Table 7: To what extent do you think students use the following drugs?

	No limit	To a low extent.	To a moderate extent.	To a large extent.	To a very large extent	I don't know	Total
Tobacco Products (Cigarettes, Hokaan, ben)	6.5%	16.8%	17.3%	20.7%	27.2%	11.5%	100%
hashish	11.3%	23.8%	20.4%	15.6%	10.1%	18.8%	100%
Opium	27.9%	21.4%	9.9%	8.4%	6.7%	25.7%	100%
Heroin	31.3%	16.1%	8.4%	9.6%	6.3%	28.4%	100%
Pregabalin Tablet	0.2%	17.1%	16.8%	14.9%	10.6%	13%	100%
Alcohol	24%	20.9%	10.1%	8.2%	7.9%	28.8%	100%
Amphetamines	34.9%	9.9%	7.5%	8.7%	7.5%	31.7%	100%
Ketamine (for inducing and maintaining anesthesia)	29.6%	14.9%	7.9%	7.9%	4.8%	34.9%	100%
K Tablet (MDMA)	15.4%	18.3%	15.6%	12.7%	14.7%	23.3%	100%
Steroids or human growth hormone (for bodybuilding)	17.8%	16.8%	15.4%	13.2%	9.6%	27.2%	100%
Use of non-prescribed sleeper spices	16.6%	17.1%	18.3%	12.7%	8.2%	27.2%	100%
Non-prescription pain reliever spice use	15.6%	18%	14.2%	15.6%	10.8%	25.7%	100%

Table 8: Which drug is addictive?

Which drugs are addictive below? (Choose more than one option)		
	Frequency	Percentage
Alcohol	252	9.6%
hashish	271	10.3%
Opium	262	10.0%
Heroin	285	10.9%
Amphetamine	255	9.7%
Tobacco products Cigarettes, Ben, Hoka, etc.	241	9.2%
Ketamine	91	3.5%
Pregabalin Tablet	167	6.4%
Spices grow height	86	3.3%
Drowsy Spice	118	4.5%
Steroids	60	2.3%
Ant pain reliever spices	125	4.8%
Anti-anxiety spice	111	4.2%
K Tablet	296	11.3%
Total	2620	100.0%

Table 9: What do you think the following drugs are addictive?

	No limit	To a low extent.	To a moderate extent.	To a large extent.	To a very large extent	I don't know	Total
Tobacco Products (Cigarettes, Hoka, ben)	3.6%	19.7%	20.4%	17.3%	32.5%	6.5%	100%
Hashish	1.7%	12.7%	16.3%	27.2%	35.3%	6.7%	100%
Opium	1.4%	5.3%	8.7%	28.8%	48.6%	7.2%	100%
Heroin (powder)	1.4% [^]	2.6%	7.9%	24.8%	55.5%	7.7%	100%
Pregabalin Tablet	1.7%	6%	7%	24.3%	50.5%	10.6%	100%
Alcohol	0.2%	2.6%	4.3%	9.6%	25.5%	50%	100%
Amphetamines	1.7%	3.1%	4.8%	24.5%	55%	10.8%	100%
Ketamine (for inducing and maintaining anesthesia)	1.9%	7.7%	7.2%	20.9%	42.8%	19.5%	100%
K Tablet (MDMA)	1.7%	4.6%	9.6%	26.4%	46.2%	11.5%	100%
Steroids or human growth hormone (for bodybuilding)	3.6%	13%	11.8%	17.8%	33.9%	20%	100%
Use of non-prescribed sleeper spices	3.8%	15.1%	12.7%	19.2%	31.3%	17.8%	100%
Non-prescription pain reliever spice use	4.8%	15.6%	12.5%	17.5%	29.8%	19.7%	100%

Table 10: Which factors do you think are involved in substance use (choose more than one option)

	Frequency	Percentage
Teen Curiosity	187	7.2%
Happiness-seeking	192	7.4%
Mental disorder	209	8.0%
Lack of knowledge about drugs	178	6.8%
Positive attitude towards drugs	143	5.5%
Low self-esteem	173	6.7%
To eliminate shyness	126	4.8%
Parental divorce	130	5.0%
Lack of recreational facilities	94	3.6%
Inability to solve common problems	156	6.0%
Population-filled family	92	3.5%
Having a strict parent	132	5.1%
The presence of an addict in the family	195	7.5%
Friends' recommendations	229	8.8%
Family disputes	171	6.6%
Easy access to drugs	192	7.4%
Total	2599	100.0%

Part 3: Awareness about the physical and psychological effects of drugs

Table 11 mentions the short-term effects of drugs due to their use, including 9 general effects of 12 drugs. According to the following results, it is seen that most participants have chosen the dizziness option, at 16.7%, and 13.5% have chosen dizziness due to a lack of sufficient awareness and I don't know the option. (See the table 11 for more information.) In (table 12) about the long-term effects of drugs due to their use, including 8 general effects of 12 substances, according to the following results, it is seen that most participants have chosen 14.8% of laryngeal and lung cancer options, and 15.9% have chosen the option due to a lack of sufficient knowledge. (See Table 12 for more information.) In (Table 13) of short-term

psychological effects caused by drug abuse in the person, which are 6 effects in the table above and occur due to the 12 types of substances mentioned above, according to the following results, it is seen that the most participants have chosen 20.6% of the painkiller option and 15.9% due to a lack of sufficient awareness. (For more information, see the (table 13). In the following table, the long-term psychological effects caused by drug abuse in a person, which are listed in the table below, are listed according to the 12 types of substances mentioned above, according to the following results: According to the results, most participants have chosen the option of violent behavior by 24.2%, and 17.3% have chosen the option due to a lack of sufficient awareness. (See the table 14 for more information.).

Table 11: What short-term physical effects are caused by drug use? Choose more than one option.

	Frequency	Percentage
Nausea and dispersion	192	14.1%
Abdominal pain	122	9.0%
Increased blood pressure	153	11.2%
Lowering blood pressure	106	7.8%
Irregular heart rate	217	15.9%
Increase in breathing numbers	158	11.6%
Reduced appetite	187	13.7%
dizziness	227	16.7%
I don't know	56	13.5%
Total	1362	100.0%

Table 12: What long-term physical effects are caused by drug use? Choose more than one option.

	Frequency	Percentage
Heart disease	169	11.3%
Liver disease	164	11.0%
Stroke	172	11.5%
Mouth and esophageal cancer	219	14.7%
Laryngeal and lung cancer	220	14.8%
Liver cancer	198	13.3%
Leukemia	173	11.6%
Weight loss and exemption problems	176	11.8%
I don't know	66	15.9%
Total	1491	100.0%

Table 13: Which short-term psychological effects are caused by drug abuse? Choose more of an option.

	Frequency	Percentage
Feeling happy and relaxed	201	19.1%
Reduce anxiety	158	15.0%
Drowsiness	158	15.0%
Increase awakening	180	17.1%
Pain killers	217	20.6%
Memory problems	141	13.4%
I don't know	65	15.6%
Total	1055	100.0%

Table 14: Which long-term psychological effects are caused by drug abuse?

	Frequency	Percentage
Delusions	119	12.6%
Depression and anxiety	211	22.4%
Insomnia	188	19.9%
Violent behavior	228	24.2%
Mood changes	197	20.9%
I don't know	72	17.3%
Total	943	100.0%

Awareness about symptoms, diseases, and the physical or psychological changes of drugs

In the table mentioned below, the student's awareness of symptoms, diseases, and physical or psychological

changes of narcotics states that in this study, 20.7% of students had knowledge but were weak, the majority (60.3%) had moderate awareness, and the average score of knowledge was 2. (See the table below for more information.)

Table 15: Awareness score

	Frequency	Percentage
Good awareness	79	19.0
Medium Awareness	251	60.3
Weak awareness	86	20.7
Average knowledge score	2	
Total	416	100.0

Awareness according to gender

According to the results of this study, men had a higher awareness of women because 25.9% of men

and 11.8% of women had good knowledge. The relationship between knowledge level and sex proved statistically significant (P value = 0.00). (See the chart below for more information).

Table 16: Awareness according to the gender:

	Good awareness	Moderate awareness	Poor awareness	Total
Male	25.9%	58.5%	15.6%	100.0%
Female	11.8%	62.3%	26.0%	100.0%
P VALUE	0.00			

Knowledge according to the University: According to the results of this study, it is seen that in the three universities where this study was conducted, the majority of students at Kabul University had a good

time by a margin of 20.5% compared to those at Kabul Medical University and Mashal University. The relationship between knowledge level and university was not statistically significant (P value = 0.06). (See the table below for more information).

Table 17: Knowledge by University

	Good awareness	Moderate awareness	Poor awareness	Total
Kabul University	20.5%	61.0%	18.5%	100.0%
Kabul Medical University	14.8%	61.1%	24.1%	100.0%
Mashal University	4.8%	47.6%	47.6%	100.0%
P VALUE	0.06			

Knowledge-based on the level of education of the parents: According to the results of this study, students whose father's education level was Ph.D. or master's level had poor awareness (0%), so the higher the knowledge of the father, the higher the awareness of drugs, and poor awareness is prevented. The relationship between knowledge level and the father's education level was statistically significant (P value = 0.02). (See the table below for more information.) and

students whose mothers were not literate had poor awareness (21.1%), so it is seen that the level of a mother's education plays a fundamental role in drug awareness because the lower the level of maternal education, the higher the students' poor awareness. The relationship between knowledge level and the mother's education level was not statistically significant. (P value = 0.49) (See the table below for more information.)

Table 18: Knowledge-based on the level of the father's education LEVEL

	Good awareness	Moderate awareness	Poor awareness	Total
Illiterate	20.7%	53.4%	25.9%	100.0%
Elementary	28.6%	54.0%	17.5%	100.0%
School graduate	10.7%	57.1%	32.1%	100.0%
14 passes.	20.0%	52.5%	27.5%	100.0%
Bachelor's degree	15.8%	69.9%	14.3%	100.0%
Master's	27.3%	72.7%	0.0%	100.0%
PhD	27.3%	72.7%	0.0%	100.0%
Higher	19.0%	60.3%	20.7%	100.0%
P VALUE	0.02			

Table 19: knowledge by mother education level

	Good awareness	Moderate awareness	Poor awareness	Total
Illiterate	19.3%	59.6%	21.1%	100.0%
Elementary	20.5%	65.1%	14.5%	100.0%
School graduate	16.0%	63.0%	21.0%	100.0%
14 passes.	18.9%	56.8%	24.3%	100.0%
Bachelor's degree	25.0%	47.5%	27.5%	100.0%
Master's	0.0%	100.0%	0.0%	100.0%
PhD	0.0%	66.7%	33.3%	100.0%
Higher	0.0%	0.0%	100.0%	100.0%
P VALUE	0.49			

Age-based awareness

According to the results of this study, it is seen that students between the ages of 16 and 20 have good knowledge and constitute 12% of the study population, while poor awareness was higher (30.4%),

and then with increasing age, awareness also increased, and the relationship between knowledge level and life was proved statistically significant (P value = 0.02). (See the table below for more information).

Table 20: Knowledge by Age

Age	Good awareness	Moderate awareness	Poor awareness	Total
16_20	12.0%	57.6%	30.4%	100.0%
21_30	21.6%	62.0%	16.4%	100.0%
P Value	0.02			

Students' Performance in Drug

In the table below, the 12 types of substances mentioned, about which students were asked about their use of the following substances, have the sixth option (from no starting limit to a very large extent, I don't want to answer), which, according to the

following results, can be seen in many percentages of these students not using any of these substances. 6.3% of tobacco products, 5.5% hashish, 7% opium, 7.5% heroin, 7.9% zikab tablets, 6.5% alcohol, 5.8% glass, 6% ketamine, 5.8% K tablets, 4.8% steroids, 5% analgesic spices, 4.1% (See the table below for more information.)

Table 21: Now we'd like to ask some questions about your use of the following materials

	None	To a low extent.	To a moderate extent.	To a large extent.	To a very large extent	I don't know	I don't want to answer	Total
Tobacco Products (Cigarettes, Hoka, ben)	58.4%	13.5%	7.2%	6%	6.3%	58.4%	6.3%	100%
hashish	70.9%	5.5%	4.6%	5.3%	5.5%	2.6%	5.5%	100%
Opium	73.6%	2.9%	4.6%	3.1%	7%	3.4%	5.5%	100%
Heroin (powder)	73.6%	1.7%	3.6%	4.6%	7.5%	2.6%	6.5%	100%
Pregabalin Tablet	70%	5.3%	3.1%	5.5%	7.9%	2.2%	6%	100%
Alcohol	72.6%	3.1%	3.6%	4.6%	6.5%	3.4%	6.3%	100%
Amphetamines	73.8%	3.1%	2.4%	4.1%	5.8%	3.6%	7.2%	100%
Ketamine (for inducing and maintaining anesthesia)	74%	3.6%	3.1%	3.4%	6%	3.1%	6.7%	100%
K Tablet (MDMA)	70.4%	5.8%	3.6%	5%	5.8%	3.1%	6.3%	100%
Steroids or human growth hormone (for bodybuilding)	71.6%	5%	2.9%	6.5%	4.8%	2.6%	6.5%	100%
Use of non-prescribed sleeper spices	65.4%	9.1%	5.5%	4.8%	5%	3.6%	6.5%	100%
Non-prescription pain reliever spice use	63%	8.7%	8.9%	5.8%	4.1%	3.6%	6%	100%

Discussion

Substance abuse, especially among adolescents, is an important public and social health problem internationally and in Afghanistan. University students are at increased risk of substance abuse. Drug abuse is a serious issue that destroys the dreams of our future generation. Young people are the most vulnerable due to the influence of mass media and television. Some young people and even adults get involved in drug abuse and illegal trafficking due to conditions such as poverty, family problems, moral deterioration, and bad behavior adaptation. As a result of the analysis and analysis of the figures obtained from this research, we find that 212 men and 204 women participated, which is in conflict with the results of a study conducted among students in Northwestern Utopia, in which 235 women and 171 were men [3]. In the current study, 8.8 percent of students were of the opinion that peer pressure can play a role in drug abuse, which is similar to the results of a study conducted among students in Northwestern Utopia, where 8.16 percent of students were under drug abuse. It was the influence of friends and peers [3]. The students (60.3 percent) had average

knowledge about drug abuse, which was contrary to the results of the study evaluating the knowledge and attitude of society towards drug use and harm reduction in Kabul, Afghanistan, in which 88.6 percent had knowledge about drugs [6]. According to the study conducted among the students of Revenda University, 34% knew about drugs. In this study, the knowledge of drugs is moderate [7]. but the study conducted among students in southeast Nigeria and the city of Isfahan, Iran found that the students had a high level of knowledge about drugs and their harm [8, 9]. In this study, 9.8% of students used tobacco products, 6.3% of marijuana, and 7.2% of alcohol to an extreme extent, which is contrary to the results of the study conducted at the University of Kalin, in which the students researched 34% of the products [5]. They used tobacco, 31% marijuana, and 29% alcohol to an extreme extent, which could be the reason for the cultural and social changes between our country Afghanistan, and the United States of America. In the current study, 7.31%, 5.5% of hashish, 6% of alcohol used to a very high extent, which is similar to the study of Kafr al-Sheikh University, in which 9.8% of students used tobacco products, 6.3% of hashish, and 7.2% of alcohol. In

the present study, 34% of students considered cocaine, 31% amphetamine, and 25% painkillers addictive, which is contrary to the results of Colin's study, in which 76% of students found cocaine, 70% amphetamine, and 70% painkillers [5]. 70% were considered addictive and the reason for this is the high awareness of drugs among the students of this university [5]. In this study, a high percentage answered that they do not use the items mentioned in the questionnaire, which is similar to the study of the American country. In the present study, students used 6.3% of cigarettes, 3.4% of alcohol, and 2.6% of marijuana to a high degree, which is almost similar to the study of Colin, in that study, students used 10% of cigarettes, 4% of alcohol and 3% of marijuana to a high degree [9, 10]. and in a study among European students, alcohol consumption was 51.4% and cannabis consumption was 14.4%, which is contrary to our results [11, 12].

Conclusion

The study was conducted to study the level of knowledge of drugs and their harms among students of Kabul University, Kabul Medical University, and Mashal University by a cross-sectional analytical method. The level of education of the fathers of most bachelors and mothers was not literate. Many students had heard about drugs and their harms, and their source of information was radio and television. Students had an acceptable awareness of the harms that made drugs largely addictive and harmful. Knowledge about symptoms, diseases, and the physical or psychological changes of drugs was moderate, awareness was statistically significant (P value = 0.00), and men had good knowledge of women. Mothers who were not educated found that the level of poor knowledge of students was also higher, but it was not statistically significant (P value = 0.49), and according to Kabul University, students had better knowledge of medical universities and torches, but it was not statistically significant (P value = 0.06). Based on age, we found that students who were underage had weak knowledge of drugs, and

finally, after examining the performance level of students, we found that they used the impaired substances mentioned in the questionnaire but were not statistically significant (P value = 0.02). The majority of students believe that drug use does not cost much, to a moderate extent.

References

1. Mamaru Melkam, Tesfaye Segon, Girum Nakie, Goshu Nenko, Demeke Demilew. (2023). "Substance use and associated factors among high school students in Northwest Ethiopia". *Pan Afr Med J*, 44:162.
2. "United Nations Office on Drug and Crime," Afghanistan Opium Survey, " 2021.
3. M. Hjalber. (2021). "Summary Report Drug Awareness and Perception Survey: 2020," Institutional Research Office Collin College.
4. Mohammad Raza Stanekzai, Catherine S Todd, Mark G Orr, Shairshah Bayan, Mohammad Zafar Rasuli, Saifur-Rehman Wardak, Steffanie A Strathdee. (2012). "Baseline assessment of community Knowledge and attitude toward drug use and harm reduction in Kabul, Afghanistan". *Drug Alcohol Rev*, 31(4):451-60.
5. Nahid Geramian, Leila Gharaat, Shohreh Akhavan Taheri, Fatemeh Mohebpour, Mahmonir Nahvizadeh, Ziba Farajzadegan, Kamal Heidari. (2014). "Development of a Questionnaire to Assess Drug Abuse among High School Students of Isfahan Province, Iran: An Action Research". *International Journal of Preventive Medicine*, 5(Suppl 2):S146-153.
6. Anne Mbwayo, Dennis Donovan, Muthoni Mathai. Catherine Mawia MusyokaI, (2020). "Alcohol and substance use among first-year students at the University of Nairobi, Kenya: Prevalence and patterns," *Plos One*, 15(8): e0238170.
7. Ibrahim Kabbash, Omar Zidan and Shima Saied. (2022). "Substance abuse among university students in Egypt: prevalence and correlates," *Pubmed*, 28(1):31-40.
8. Elena Chover-Sierra, Rut Navarro-Martinez, Virginia Andriusevičienė, Eugenia Vlachou, and Omar Cauli, Natura Colomer-Pérez. (2019). "Alcohol and Drug Use in European University Health Science Students: Relationship with Self-Care Ability," *International Journal of Environmental Research and Public Health*, 16(24):5042.

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