

Exploring Drug Use Process among Kurdish Migrant Workers in Workplaces: A Qualitative Study

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Abstract

Background: Drug addiction is a significant social, medical, and health problem. . Although employment has often a positive effect on people's quality of life, there is evidence that inappropriate condition in the workplace may trigger for drug use in employees. The aim this study was to explore contributing factors to drug use among migrant workers. Methods: In this qualitative study, Thirty-five subjects were recruited through purposive sampling. Data were collected by using a variety of qualitative techniques such as in-depth, semi-structured face-to-face interviews with open-ended questions and group discussion. Results: Among the entire interviews, 529 initial codes and 283 main codes were extracted and classified into 18 categories and five themes after careful examination. Conclusion: As the results showed, drug use is prevalent among workers. The most important recommendations to prevent drugs use in workplace are taking more serious measures against drug dealers, prohibiting carrying drugs at workplace, implementing stricter drug test before recruitment and periodical tests and considering worker rights is useful. Keywords: Drug use, addiction, migrant worker, workplace, employee

Background

Drug addiction is a significant social, medical, and health problem (1). Although employment has often a positive effect on people's quality of life, but, workplace condition may develop drug use behavior among employee. related factors influencing on prevalence of drug use in workplace including, long working hours, heaviness of work, hard work in adverse weather conditions, lack of control employer, employers' negligence of adverse outcome of drug use, and lack of preventive and treatment actions, occupational stress, unhealthy working environment, easy access to drugs, discrimination, conflict, , monotony of work, and irregular work shifts (2).Furthermore, psychological, emotional and social factors such as lack of family support and supervision, living in high-risk environments regarding proximity to drugs, and communication with addict colleagues in the workplace, being away from family, living in camps and dormitories, put workers at a higher risk of drug and alcohol use (3) (4) (5).

Moving from one place to another in search for job opportunities cause individuals to face new environments, problems, and situations that are unfamiliar. They have not only lost their former relatives or friends, but also encounter stress and psychological distress from many sources in new living and working environment(6). In addition, some of these people are not usually given sufficient income and are forced to live and sleep in parks, streets, or half-built buildings. Living in such environments provides a basis for delinquency, social deviations, and drug abuse among migrant workers (7). The number of industrial workers are increasing and lack of job and worker immigration put them at risk of drug use and homelessness (4).

According to 2010 annual report of Iran drug control headquarters, 21% of the total 13 million workers in Iran are drug addicts, and the highest prevalence of drug use is among simple workers (18.7%). This report also indicates that 70% of the country's drug addicts are employed; 10% of them had started using

drugs in workplace, and in more than 10% of them the first use of drugs had occurred at a suggestion of a co-worker (8).

Kurdistan is a province located in the west of Iran, with a population of 1,493,645 (9). The estimated employment-to-population ratio in Kurdistan is 33.3% (22.8% for the agriculture sector, 26% for the industry sector, and 45.4% for the service sector) (10). High rates of unemployment have caused Kurdistan's people to turn to false jobs and migrate to other cities to find a job and provide living expenses. There are no official statistics on the number and status of addiction and drug abuse in Kurdistan. However, a report from Coordinating Council for Drug Control in Kurdistan revealed that there are about 20,000 drug and stimulant users across the province. Increase addiction to drug made raised concerns for health authorizes at province and country level. Based on risk factor identification approach, the purpose of drug use prevention is to eliminate or reduce the risk factors. Hence, this study is to explore contributing factors to drug use among migrant Kurdish workers to Tehran.

Methods

Participants

A qualitative methodology was applied in this project. Participants for existing study were workers who left their city to find job. In order to achieve a diverse perspective, the purposive sampling procedure was performed to insure that workers with different levels of socioeconomic context, age, level of education, and marital status are existent in this project. The characteristics of participants are offered in Table 1.

Data collection

Focus group discussions and in-depth interviews were applied in order to data gathering.

i. Focus group discussions

At the first of study, focus group discussion (FGD) was applied to explore the subject with 8 workers. FGD was accomplished in places that were suitable and accessible for workers. FGD session lasted for about 45-60 minute.

ii. Semi structured interviews

After FGD, 27 semi-structured, open-ended questions were applied with workers in order to reach deeper data. All interviews were tape-recorded. At the opening of each interview, the workers were questioned about demographic data. They were requested by interviewer with interview guide for describing and discussing their experiences about drug use in workplace. Depending on the topics were presents by the workers, the researcher continued interview with other questions such as "what was your first experience about drug use in workplace? Why did you use drug in workplace? What factors is related to drug use in workplace? "If you drug use in workplace, what were the situation that you experienced?" What conditions were related to drug use in your workplace? What did you experience about life away from your family?

Moreover, it was asked about social, cultural and environmental components that might have affected workers drug use behavior. After each interviews workers were demanded to explain more about what they have described. For instance, workers were asked 'What do you mean?' 'Describe further' with the aim of have deeper considerate of workers' experiences about drug use. The interviews were applied at a place convenient for the respondent. Each interviews sustained for nearly 60–100 minute.

Data analysis

It was used a content analysis with a conventional method for analyzing the records and to discover key themes as well as associating trends and patterns took place through the diverse individuals. As such the main researcher read the interviews several times and discussed the best approach about coding. Throughout the passé of analysis, main investigator commonly confirmed dissimilarities and similarities in the documents and manuscripts, and preferred key concepts and made analytical categories by doing contrast of each section of data with other data. Additionally, it was used MAXQDA software version 12 for analyzing of data.

Results

Description of study sample

The thirty-five workers who participated in this study were between 15 and 40 years old with a mean age of 28.2 years. Due to a lack of access to women worker who were drug users, this study was conducted among male workers only. (34.2%) of them were 15 to 25 years old. More than half of the workers (57.1 %,) had completed secondary or high school, (62.8%, of them were contract workers, Also, 57.1%, were married. (Table 1). Opium (57.1%) was the most common drug used by the workers. (4, 11.4%) of workers had a history of injection drug use (Table 2).

The themes extracted from the experiences of the participants

Based on the all interviews, five themes were extracted from the data. In this study, 529 primary codes and 283 main codes were extracted, and after a detailed survey, 18 main categories and five themes were extracted, including personal factors, job factors, structural factors, cultural factors, and family factors.

Theme #1: individual factors

High rate of unemployment in small cities and less developed provinces, failure to recognize job opportunities and the proper grounds and low economic growth rate convince many to migrate to large cities and to live in slum areas that are characterized with cultural and social poverty, and being a good ground for crime and drug addiction. According to the participants, the majority of migrant workers only took opium, hashish, and cigarette occasionally before their migration. After migration to larger cities, feelings of loneliness, the absence of family members, the easy access to drugs, the proliferation through mass media about the good effects of these drugs on solving sexual problems, and the lack of information about the damages caused by drugs, lured workers to become regular users.

Personal factors prepared the ground for drug use in workplace. Factors such as feeling homesick, losing support, lack of adequate income, poor physical and spiritual conditions, low education level, and lack of adequate information all have vital influence on drug use behaviors in workplace. This theme contained several subcategories: emotional factors, physical factors, financial factors, information factors, and personal capabilities factors. positive and negative emotional feelings and lack of skills to manage these feelings in some of the works leading to drug use. Such as, feelings of homesickness, hopelessness and impatience had adverse effects on the workers who work away from their families. Also, workers economic, mental, and family condition are among the factors that prepare the ground for development of drug addiction at work.

"Living away from my family and in a small room with a few other guys makes me more sensitive. I miss my old mother; I have not been able to visit my family in the past two months." (P3; 32 years old, single, , a construction worker ,high school education, a heroin user).

"After the working hours, I had to stay in the half-built building. I did not have a good living condition at that time. I lived almost like homeless, the cold weather, homesickness, and seeing no familiar face made me depress so, I found a solution in using drugs and hanging around with my colleagues." (P7; 25 years old, married, high school education, divorced, primary a heroin user).

"I had no idea about drugs when I was at my hometown, but working in Tehran taught me all about drugs. One of the colleagues gave me Tramadol and a bit after, another one invited me to test opium.I really enjoyed it. Living alone made me a drug addict because I had no one to control me. I spent my money freely for drugs and each time I tried a new drug." (P6; 45 years old, married, college education, a crack-heroin user).

"When my colleague offered me Hashish, I had no idea that I might become a drug addict. I became familiar with other types of drugs at work." (P17; 45 years old, a public service worker married, high school, a crack-heroin user).

"In the early days, I had to carry out heavy cement sacks and do heavy work. To kill the physical pain, my colleagues recommended opium." P8; 34 years old, primary school education, divorced, heroin user"

Theme #1: Job factor

Job factors related to the work place have a role to drugs use. The pressure of peers who use drugs , easy access to drugs at work, heavy work, stressful condition like lack of job security, lack of interest in job, injustice at work and lack of implementation of anti-drug regulations, monotonous work condition, wrong beliefs about drug (that it is good to improve performance and strength),

"Imagine working for 12 hours every day with a very hot machine and three obligatory overnight shifts. Do you see any other way than taking drugs in this situation? At first, I used drugs occasionally to stay awake overnight, but gradually I began to use the drug every day before work, and during and between shifts" (P8; 28 years old, primary school education, single, opium user).

"My boss is very bad behavior with me. I do not know why he always has a problem with me. No matter how hard I work, my overtime work salary is less than others. I would not stay here if it was not for my family. I consume more drugs after a quarrel with him. A friend of mine brought crystal to the workshop and told that it causes no addiction and things like that to convince me to use it. I accepted to take it. At first, I used it only once a week, but now it is a regular habit.

I used crystal for the first time in Tehran when I was working in a restaurant. A guy taught me how to use it; at that time, crystal was not common in Kurdistan. Using drugs was a way to gain more strength to stand the long working hours from 7 am to 1 am. When you work in another city away from your family, there is a high risk of becoming a drug addict, especially when there are other drug addicts in the workplace."

"P10; 41 years old, married, high school education, a crack-heroin user).

Structural factors

There are several factors at this theme including legal and regulating system, facilities, and availability of drugs. The majority of the participants mentioned the importance of the employer's supervision at the workplace. It seems that there is no well-codified program to prevent drug addiction even at labor-related organizations.

"My friends and I used to take drugs after work or late at night. The employer was aware of it. I believe that he also was a consumer. Still, he insisted that we should not use drugs in the presence of other workers." (P11; 29 years old, high school education, married, opium user)

"There must be more strict supervision on drug use at work. The workers must be tested regularly and occasionally to find and fire drug addicts and the boss should provide healthy environment and without drug for workers" P8; 28 years old, primary school education, single, opium user).

Cultural Factors

Factors like beliefs and thoughts and cultural condition are effective in the expansion of drugs in workplace. Wrong beliefs about drugs like that it is good for strengths and staying sharp were effective in drug addiction among workers. According to the participants, weak religious and spiritual beliefs are also effective to become a drug addicted.

"I heard from my colleague drug use make us awake all the night when we worked overnight and it not us addict." P10; 41 years old, married, high school education, a crack-heroin user).

Maybe if I had a stronger belief in God, I would not become a drug addict. People lose their God and then become a drug addict. "p13, 23years old. Single. University education, opium user)

The media and TV should inform people about drug addiction before they become one. I have never seen and heard anyone teaching anything about drugs at work."

(P10; 41 years old, married, high school education, a crack-heroin user)

Family factors

Lack of financial and emotional support and family atmosphere have a notable effect on the development of drug abuse behaviors. In most of the cases, living away from family, losing family support, and having history of drug use in the family was very effective in the development of drug addiction.

"I barely contact my family, and I have not been in Kurdistan since the New Year Holiday. The telephone is the only way to communicate. Sometimes I miss my mother. If I would still live with my family, many of the current problems would not exist. At least, I am sure that I would not be a drug addict. ." (P7; 25 years old, married, high school education, divorced, primary a heroin user).

"I have five brothers and two sisters; three of my brothers are occasional drug users, and one of them uses crystal. As far as I remember, there was always somebody in the house using drugs."

"p13, 23years old. Single. University education, opium user"

Discussion

Workplace is an area of social life that play an undeniable role in economic development, performance improvement, and innovation. The world of work is one of the areas of social life that should be considered for the health of the people..The present paper focused on drug use among workers. Given that drugs are used at work place, and the severe harms appeared as insecurities at work, studies on the prevalence and distribution of drugs and alcohol at work have drawn a great deal of attention among researchers (11).

Personal Factors

All the participants were forced to leave their hometown in search of a job. This study showed that the majority of participants were not use drug in their hometown; however, they had experienced to drug use after finding a job away from home. The most important preventive environmental factor to not use drugs in the workplace is the fear of losing the job; however, none of the participants mentioned this factor. Factors such as living away from family, bad spiritual condition, and experiencing unpleasant feelings were among the factors that prepared the ground for drug addiction, which is consistent with other studies (4, 12). Also, reported a significant relationship between drug use and living away from family. In our study we also found that the majority of the participants lived in workers houses or half-built building, which in most of the cases are very unhealthy. These facilities are usually overcrowded, and many of the

residences are drug users who openly use drugs in shared spaces (4). Living away from family and with other workers are among the factors that increase drug use among workers.

Regarding the age range, the younger workers were more interested in using drugs and alcohol at work. Professional workers were less interested in drugs comparing with workers with rotating shifts (13). A survey of the prevalence and pattern of using alcohol in Australian workers showed that such behaviors were most common in workers of industrial plants following by construction workers, hospital staff, and farm workers. Creating stable job opportunities in rural areas can convince local residents to stay in their villages. Creating job opportunities is a way to prevent migration from villages to cities.

Job Factors

Heavy workload, late night work, and overnight shifts that threaten the mental health of workers prepare the ground for drug use. The condition of using the drug at work refers to the worker's perception of the extent that the work environment supports using drugs and alcohol at work. According to Ames et al. there are three aspects of the condition of using drugs at work. The first aspect is defined as the perceived access to alcohol and drugs. That is the extent of access to drug and alcohol at work during work hours and break times. The second aspect is pictured as the norm, i.e., the extent of using drugs among the members of friends and colleagues network. The last aspect deals with the norms of accepting or rejecting drug use in social networks at work (14).

The participants mentioned a heavy workload as a factor that prepared the ground for using drugs. This factor was mentioned in another similar study. Saberi-Zafarghandi et al. reported that drug use was most common at construction workers and in workers with heavy works (4).

The majority of the participants also referred to stress at work as one of the factors related to drug use. Frone (15) argued that the negative psychological aspects at workplace predict motivations to drug use. Long-term stresses might trigger nervous-chemical and hormonal changes. This phenomenon has to do with anxiety, depression, weaken immunity system, higher risk of death, cancer, and cardiovascular diseases. To decrease stress, some individuals choose drugs and alcohol. Muntaner et al. (16) emphasized the relationship between mental-social environment and mental health. Of note, there are many factors effective in using drugs and alcohol; however, stress is one of the most critical factors in this regard.. Consequently, there are two general conditions for stress attenuation recognized by Conger. One relies on the fact that using drugs decreases stress and problems that lead to stressful condition and another is that facing with stressors leads to drug use. Work shifts are categorized among stressors as they interrupt workers' biological clock and lead to bad moods, sleeping problems, and loss of appetite. Researchers have argued that overnight shift workers feel the desire to smoke twice the day shift workers (17). Consistent with Frone (13), our results indicated that perceived lack of job security in workers was related to drug use.

Another finding is that the majority of the participants mentioned contaminated of work environment and addiction among their colleagues. Also, this finding is consistent with Lehman study that showed one out

of five participants had seen their colleagues using drugs at workplace (18). Some work conditions cut the workers' connection with their social networks. Under hard conditions like stressful work condition, heavy workload, complicity of workspace, low income, feeling no power and authority at work, and even other similar problems like problems in private life, people try to find tranquility in anything including illegal drugs and alcohol.

Structural Factors

According to the participants, there is no special outcome for workers with drug use behaviors. and some of Iranian employers are negligent of drug use among their employee including, their reasons in view of participant are such behavior does not interfere with the job. One of the general aspects of the health promotion in workplace is to create a drug-free environment. It is to be noted that successful implementation of such policies and approaches depends on social and economic factors. Such factors include social values, quality, and availability of social networks, economic condition, common social policies, service providing systems, and relationships at work. Among organizational policies for the workers who use drugs and providing consultation and treatment services at workplace. Thus, there is a need to adopt an educational approach to remove wrong beliefs about drugs and its effects on improving the performance of the employees. Adopting a constructive approach to drug addiction, informing the personnel about the services and resources for treatment, general screening to find drug users at early stages, providing consultation for families and personnel throughout detoxification whether it is done through hospitalization or otherwise are also recommended. For instance, using alcohol during breaks, at the office or even at some specific hours in the day is allowed in some workspaces (19). The participants reported that the employers did not care about drug using habits among their employees and did not take it seriously unless such behavior affected the performance of the employee. This finding is consistent with other studies (4, 20).

Cultural Factors

Cultural factors were also highly effective in drug use behaviors in workplace. Migration to large cities creates several problems. The MDMP3 published list of the jobs with high risk of using drugs and this list reads artists, musicians, medical personnel, farm workers, and transportation workers (mainly long-range truck drivers); one common feature of these jobs is the massive pressure so that the nature of these jobs fosters a drug using culture. To improve the performance of employees, some profiteer employers even provide a supporting condition to use drug (19). Moseki (20) showed that employer guide them toward using drugs to adapt to their situation I mine workers in the Sought Africa that. As a result, negative behaviors find a chance to appear as a way to adapt to the new complicated lifestyle. Another aspect that can predict the development of a drug using culture at work is social control at workplace. Critical factors like low sense of organizational commitment and belonging, highly variable work hours, inadequate supervision, working in isolation, the absence of official policies in this regard, and legislation about using drugs at work all contribute in the expansion of such behaviors at work.

Limitations

The results were based on private interviews with workers, and no medical test was carried out, which might create bias in the findings. The study focused on men workers. However, some studies have emphasis on role of gender in using drugs. Another limitation was rooted in the type of study, relying on interviews, and the probability of error in all of these. Unwillingness of some workers to participate was another limitation, which might have been due to the fear of losing a job or facing negative consequences.

Conclusions

As the results showed, drug use is prevalent among workers. The most important recommendations to prevent drugs use in workplace are taking more serious measures against drug dealers, prohibiting carrying drugs at workplace, implementing stricter drug test before recruitment and periodical tests, paying fair salaries, separating workspace of drug addicts and healthy workers at work and after work (workers camps), devising leisure and educational programs about drugs, establishing drugs clinics based on the latest standard of detoxification and methadone maintenance treatment, establishing damage control centers, promoting self-help activities among drug addicts, providing free treatment and rehabilitation leave for drug addicts, performing follow up drug test after rehabilitation and returning back to work, and developing program to improve personal skills such as anger/stress management for workers.

Abbreviations

FGD; focus group discussion

Declarations

Ethics approval and consent to participate

The study procedure was approved by the Ethics Medical Committee Iran Kurdistan University of Medical Sciences [Grant Number:419/23]. This study involved only persons who gave their informed consent. For this, verbal informed consent was obtained from all participants before starting this study, and all participants completed an informed consent form after being explained the study's aims.

Consent for publication

Not applicable.

Availability of data and materials

The datasets produced and analyzed throughout the present study are not publicly available in order to keep the participants' privacy but are available from the corresponding author on sensible request

Competing interests

The authors declare that they have no competing interests. Besides, Maryam Khazaee-Pool as a member of the editorial board (Associate Editor) of BMC Public Health journal declare that she has no competing interests.

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Authors' contributions

TP was the main investigator, designed the project, collected the data, did the statistical analysis, and wrote the first draft of the manuscript. MK, AR and TP participated in the statistical analysis. FD, HM and KP provided further content and critically revised the final article. All authors read and accepted the final Iran Drug Control Headquarters paper, and agreed to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. All authors read and approved the final manuscript.

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Tables

Table 1. Socio-demographic characteristics of the participants (N=35)

Variable	Sub-variable	Number (%)
	15-25	12 (34.2)
	26-32	11 (31.4)
	33-39	5 (14.2)
	≥ 40	7 (20)
	Primary/middle school	7 (20)
	High school	20 (57.1)
	University	8 (22.8)
	Part-time worker	13 (37.1)
	Contract worker	22 (62.8)
	Single	7 (20)
	Married	20 (57.1)
	Divorced/separated	8 (22.8)
	0.5-1	3 (8.57)
	1-2	26 (74.2)
	More than 3	6 (17.1)

Table 2. Baseline characteristics of participants according to drug use (N=35)

Category	Sub-category	Number (%)
	Opium	20 (57.1)
	Heroin	6 (17.1)
	Methamphetamine	5 (14.2)
	Crack heroin	4 (11.4)
	Smoking	16 (45.7)
	Snorting	5 (14.2)
	Ingestion	10 (28.5)
	Intravenous	4 (11.4)
	Less than 200	9 (25.7)
	200-499	21 (60)
	500-700	5 (14.2)
	Yes	4 (11.4)
	No	31 (88.5)
	Yes	8 (22.8)
	No	27 (77.1)

* According to the most frequent route of drug administration by the participant

Table 3. Themes and categories extracted from content analysis with regard to the experiences and comments of the workers about the role of the work environment in drug abuse

Theme	Category	Code
Personal factors	Emotional factor	Homesickness, loneliness, mental problems, anger, lack of confidence, personal curiosity, depression, disappointment, sense of inferiority, Fatigue, drowsiness, sense of peace
	Economic factor	Low income, Poverty
	Physiological factor	taking drugs to relieve fatigue, taking drugs as a stimulus, reducing physical pain, increasing physical endurance ,increasing sexual potency Increasing appetite, fatigue, sense of peace, improving insomnia, Increasing alertness
	Personal capabilities	Inability to say no, low self-efficacy, low self-esteem, lack of confidence
	Information	Lack of knowledge, aimlessness, Lack of awareness about drug addiction
Job factors	Psychological	The sense of injustice with how they are treated at work, Job dissatisfaction, work pressure, monotonous work condition, Unfair competition at work
	Social	Job instability, absence from work
	Factors related to colleagues	Colleagues' jealousy, Conflict with colleagues Colleague's profiteer, Sexual discrimination at work, Quarrel with colleagues
Structural factors	Legal factors	Ineffective and wrong labor laws Presence of drug addicts in work environment
	Supervision system	The absence of a proper monitoring system at work Failure of the Ministry of Labor to supervise work environments Failure of the Department of Labor to supervise work environments Inadequate supervision Inadequate education for managers
	Facilities and drugs	Sharing a room or an apartment with drug addicts

		<p>Having drug users among friends, Easy access to a variety of drugs at work, Peers' pressure (friends invitation to drug use), Working low-level jobs</p> <p>Unsanitary work and life environment, <i>Employer's addiction</i>, Role of a colleague in development of drug addiction ,Easy access to drugs, Unhealthy work environment, Lack of regular drug testing program, Inexpensive drugs</p>
	Beliefs	Cultural differences, Wrong beliefs about drug use, Believing that occasional drug use does not result in drug addiction
	Spirituality	Religious beliefs, negligence of religious beliefs
	Role of the media	Media functions, Ads in satellite channels
Cultural factors	Beliefs	Cultural differences, Wrong beliefs about drug use Believing that occasional drug use does not result in drug addiction,
	Spirituality	Religious beliefs, Negligence of religious beliefs
	Role of the media	Media functions, Ads in satellite channels
Family factors	Financial support	Family poverty, Low income of the parents, Selling drugs at home
	Emotional support	Drug addicts in the family, negligence of family Lack of parental supervision, divorced parents Losing loved ones, family quarrel, Living away from family
	Family atmosphere	Negative family environment, Parents' failure to supervise relationships among children, The poor performance of the family in child rearing

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