



People's Democratic Republic of Algeria  
Ministry of Higher Education and Scientific Research  
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Faculty of Social Sciences and Humanities  
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Sociology

**Pedagogical Monograph**

**Course Title: Drugs and Society**

**Intended for: Second Year Undergraduate Students (LMD  
Program)**

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**2025/2026**

## **Course Content:**

- 1. Concept of Drugs**
- 2. Classification of Drugs**
- 3. Types of Drugs**
- 4. Stages of Drug Use**
- 5. Characteristics of Drugs**
- 6. Theories Explaining the Addictive Behavior of Drug Users**
- 7. Causes and Factors Leading to Drug Use (Socio-Psychological, Economic, and Cultural)**
- 8. The Role of Socialization Institutions (Family, Mosque, School, and Media) in Addressing This Phenomenon**
- 9. Means of Prevention and Treatment:  
The Strategies Adopted by the Algerian State to Reduce the Spread of the Drug Phenomenon**

## **Introduction:**

The scourge of drugs is considered one of the most serious social phenomena known to humankind and a crucial topic in human, health, psychological, and even social studies, both ancient and modern. Societies have known them since antiquity. Although their discovery was purely accidental or through experimentation in the search for a cure, and despite their initial limited use solely in medicine for healing illnesses and alleviating pain, this use eventually deviated from its therapeutic path, transforming into a menace that threatens all who use it.

With the world's development, the forms and types of drugs have evolved, and their spread has broadened, posing a threat to all segments of society, from individuals to families. Drugs are no longer merely a health or behavioral risk; they have become a cancer that erodes various aspects of life, including economic stability, public security, and the social fabric as a whole.

Drug use has been linked to a set of causes and factors, which may be direct or indirect, individual or related to the user's environment, whether psychological or social. Some factors are also connected to the community's general policy. Furthermore, its effects are not confined to health problems; they extend to the disintegration of the social fabric, such as family breakdown, divorce, juvenile delinquency, rising crime rates, and the imbalance of social equilibrium for individuals and societies.

Delving into the understanding of the drug phenomenon leads us to a comprehensive, multi-dimensional approach, particularly psychological, social, legal, cultural, educational, and even economic and political. To address this phenomenon, all efforts within society—from individuals and institutions to all organizations of the international community—must be activated.

The study of the drug phenomenon is of paramount importance in the social sciences, as it is a complex and multi-factorial phenomenon. Therefore, we must address it through multiple approaches that combine sociological, psychological, health, and legal analysis to reach a deeper understanding of this phenomenon, encompassing all its causes, effects,

mechanisms of spread, and ways to mitigate this phenomenon. This includes the preventive and curative strategies followed by the state to eliminate this scourge, alongside the intensified efforts among socialization institutions such as the family, school, civil society, and state institutions.

# Lecture 01: The Concept of Drugs

The definition of drugs is a concept that requires careful consideration, especially since its essence and connotation vary across different disciplines and scientific contexts: law, psychology, sociology, and medicine. Nevertheless, they remain substances used either for alleviating pain and soothing wounds when used for medical treatment, or for narcotic effects on the mind if not used under medical supervision. The variation here goes beyond mere linguistic difference; it reflects the multiplicity of dimensions and approaches.

Therefore, a primary step in studying this phenomenon is to define the concept of drugs and review the multiple definitions that have been proposed concerning it—whether psychological, social, legal, religious, or medical—to clarify the picture and form a comprehensive understanding of this phenomenon.

## 1. Definition of Drugs:

### 1.1. Technical (Terminological) Definition:

Drug: The word is derived from the Greek word *narcoses*, meaning to numb or to make narcotic. A drug or narcotic substance is any raw or prepared material containing stimulating or sedative essences that, if used for purposes other than designated medical or industrial ones, can lead to a state of habituation or addiction, thereby harming the individual and society physically, psychologically, and socially.

Alternatively, it is any raw material, naturally sourced or chemically manufactured, containing inhibitory or stimulating substances that, if used for non-medical purposes, cause a disruption in mental processes and lead to a state of habituation and addiction, harming the person's health physically, psychologically, and socially (Al-Hassani, *Ibid*, p. 13).

Drugs are defined as every intoxicating substance characterized by the property of alcohol, which causes damage to the stomach and produces effects on the mind, such as

hashish and related substances, which are considered intoxicants. They possess the same characteristics as alcohol in terms of damaging the stomach lining and going directly to the brain, thus being subject to the penalty for intoxication.

The World Health Organization (WHO) defined drugs as any raw, prepared, or synthetic substance containing hypnotic, sedative, or depressant elements that, if used for non-medical purposes, can lead to a state of habituation or addiction, causing psychological or physical harm to the individual and society (Al-Hassani, *Ibid*, p. 14).

### **1.2. Social Definition:**

A drug is anything that disturbs, depresses, or numbs the mind and alters the individual's thinking and personality. There is a difference between habituation and addiction. Habituation is a stage leading to addiction, a state of craving to use a certain drug, characterized by a compulsive desire in the habituated person to continue and persist. Habituation is the first step toward addiction. Addiction, on the other hand, is a complete psychological or physical dependence on the narcotic substance, making the need for it an urgent, compulsive necessity that supersedes even the importance of food and drink (Hamdi Al-Muhanni, 2013, p. 03).

They are substances used as a means of escaping reality, often consumed by individuals under social, psychological, or economic pressures, and are associated with an environment of deviance, marginalization, and inability to achieve social adaptation (Ibrahim Samarah, 2016, p. 5).

This definition highlights the social background carried by the term 'drugs' and underscores the societal responsibility for the emergence of this phenomenon, appearing as a disruption affecting the social fabric, both within and outside the family. It also emphasizes the impact of this phenomenon on the individual's body and on what occurs within society.

### **1.3. Psychological Definition:**

From a psychological perspective, drugs are defined as:

Any natural or chemical substance that, upon consumption, causes a change in mood, perception, or behavior, and leads to psychological or physical dependence, thus affecting the individual's psychological balance (Bouhafss, 2021, p. 02).

This definition serves to highlight the changes that drug use causes in the individual's psychological state and the resulting effects, such as a disruption of psychological balance, anxiety, depression, insomnia, or dissociation and detachment from reality, not to mention the temporary euphoria these substances induce.

#### **1.4. Legal Definition of Drugs:**

They are a group of substances that cause addiction (psychological and physical dependence) and poison the central nervous system, and whose circulation, cultivation, or manufacture is prohibited except for purposes specified by law.

Legal scholars have differed in defining a drug and the substances that can be included under narcotics. This was noted at the International Congress on Penal Law in Budapest in September 1701. Some consider hashish and alcohol to be drugs, while others exclude them from this scope, stating that the term 'drugs' includes substances that lead to addiction. Criminal law specialists, based on the principle of legality of crime and punishment, hold that a drug is a term encompassing all substances to which the character of narcotics is legally conferred. Therefore, drugs are a group of substances that cause addiction and poison the nervous system, and whose circulation, cultivation, or manufacture is prohibited except for purposes specified by law. André Decourière sees drugs as all substances and compounds that cause addiction and harm the human being (Boughraf, 2021/2022, p. 6).

This definition places drugs within their legal and statutory framework, criminalizing every act that contributes to their illicit delivery to persons, from planting to selling and consumption, thereby outlining the legal and criminal context of this phenomenon.

#### **1.5. Scientific Definition of Drugs:**

They are any natural or synthetic substance that affects the central nervous system and leads to a state of habituation or addiction, and is listed in the legal schedules adopted in national and international legislations (Abdullah Al-Hawwari, 2009, p. 45).

A drug is not limited to what is natural or naturally manufactured; it also includes any chemical substance that causes drowsiness, sleep, or loss of consciousness accompanied by pain relief. The general definition can be: "The substance that poses a risk to the individual's health and to society." Accordingly, all narcotics fall under what is termed 'Dangerous Drugs', which is a substance whose consumption leads to the concealment, blockage, or prevention of the mind from performing its functions, or the distortion of that performance (Abdullah Al-Hawwari, *Ibid*, p. 13).

Despite the multitude of definitions, the World Health Organization (WHO) defines it as "Any substance that enters the body and works to disrupt one or more of its functions."

Thus, they are all substances that affect the nervous system, causing physiological or psychological transformations, and may lead to addiction or poisoning. They are extracted either naturally from plants, insects, or animals, or unnaturally, manufactured through single chemical substances or a combination thereof to obtain substances that alter the human state. Their purpose is to tamper with the human mind, emotions, and thinking, and they change the human mood state, whether taken legally for treatment or pain relief, or taken illegally to achieve temporary euphoria.

Muhammad Fathi Eid defines them as a group of drugs that affect the mental activity and psychological state of the user, either by stimulating the central nervous system, slowing its activity, or causing hallucinations or delusions. These drugs cause addiction, and their use results in numerous problems

#### **1.6. Religious Definition:**

Jurists define them as any substance that obscures the mind and senses and is ruled to be forbidden in Islam by analogy with intoxicants.

Any detraction from the objectives of Sharia is considered forbidden. Drug use leads to the loss of intellect, and anything that removes the intellect is forbidden in the Islamic religion.

Generally, drugs can be defined as natural, artificial, or synthetic substances that affect the judgment of the mind and lead to addiction, as well as causing numerous problems for the individual, whether biological, psychological, or social.

## **2. Definition of Addiction:**

Addiction refers to habituation, persistence, or regular repetition of a specific act. It is a psychological disorder resulting from the compulsive use of substances or engagement in certain activities, where the addict's life becomes dominated by what they practice or consume, leading to psychological and physical dependence. It becomes difficult to stop or cease this behavior without therapeutic or social interventions because sudden cessation will result in withdrawal symptoms for the user.

Addiction is also considered a social phenomenon generated by the confluence of abnormal factors within society such as family breakdown, divorce, poverty, and unemployment, which push the individual to consume them or enter the world of addiction to harmful behaviors for the purpose of escaping reality.

## **3. Concept of Use:**

Drug use is the intake of a narcotic substance from time to time and irregularly, meaning without reaching the stage of complete dependence on this substance. It usually precedes the stage of addiction; if the user stops consuming these substances, they may not experience withdrawal symptoms or symptoms of addiction.

We will attempt to explain the difference between Use and Addiction through the following table:

**Table No. (01): Comparison between Drug Use and Drug Addiction**

<b>Domain</b>	<b>Drug Use</b>	<b>Drug Addiction</b>
<b>Definition</b>	The consumption of narcotic substances irregularly, temporarily, or perpetually.	The consumption of narcotic substances regularly and perpetually, reaching complete psychological and physical dependence.
<b>Degree of Danger</b>	Less dangerous compared to addiction.	A very high degree of danger.

<b>Control Over Behavior</b>	The user can stop consumption whenever they wish and can control it by their own will.	Cessation of consumption is impossible without therapeutic intervention; the user loses control over their behavior, accompanied by a continuous desire for consumption.
<b>Physiological Symptoms</b>	Generally, no withdrawal symptoms are present.	Withdrawal symptoms are very strong for the addict, and sudden cessation is impossible without specialized therapeutic accompaniment.
<b>Psychological State</b>	Remains stable, except in cases where it is mildly and unnoticeably affected.	Addiction leads to severe psychological disorders such as anxiety, depression, tension, and insomnia.
<b>Socially</b>	Social relationships are slightly affected, or may not be affected at all.	Addiction leads to the deterioration of social, familial, professional, and human relationships in general.
<b>Need for Treatment</b>	May only require advice and awareness and generally does not need treatment.	Requires focused therapeutic intervention to eliminate withdrawal symptoms, involving physiological and psychological treatment simultaneously.
<b>Continuity</b>	Use continues based on the individual's desire and usually occurs for a limited period.	Addiction becomes chronic, accompanying the individual and remaining continuous.
<b>Dosages</b>	The user is usually satisfied with the same dosages consumed each time.	The addict tends to increase the dosages repeatedly, which often leads to overdoses that result in death.
<b>Awareness of the Problem</b>	The user usually acknowledges and recognizes the transgression and often changes their behavior and ceases use.	The addict lacks awareness of the severity of the problem, denies it, justifies it, and explains their behaviors with illogical rationalizations, often blaming others for their mistakes.
<b>Consequences of Behavior</b>	If the situation is realized, the consequences are	Addiction has dire and devastating consequences for health, society, and

	adjustable and limited, whether socially, familially, or health-wise.	the family.
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**Source:** Merghad Zineb

#### **4. Definition of Habituation:**

Habituation refers to the state of becoming familiar with a thing and repeating it until it becomes a custom or practice. It is a psychological state that arises from the repeated intake of a specific narcotic drug. This state is characterized by a non-urgent desire to continue consuming the drug for the sake of the comfort it provides. Its intake is not accompanied by a tendency to increase the dosage consumed. Furthermore, habituation may lead to psychological dependence more than physical dependence. Consequently, stopping the consumption of the habitual drug does not lead to withdrawal symptoms (Shaaban Attiyat, 2000, p. 17).

Therefore, habituation is a psychological state situated between the stages of use and addiction. It is the intermediary stage where the body begins to adapt to the substance and starts to get accustomed to it, marking the beginning of addiction. In this stage, the individual transitions from experimentation to behavioral association. It is the pivotal point that separates use from addiction, and from which addictive behavior develops, especially if appropriate intervention is not made and an adequate and effective strategy for prevention is not built, particularly in environments most vulnerable to use and habituation to these behaviors and actions, such as adolescents, children, and even young adults, through reinforcing awareness of the dangers of habituation.

The concept of drugs is not limited to a single definition or a specific domain; rather, it varies according to specializations and viewpoints. It is a multi-dimensional concept encompassing the legal, social, psychological, health, and religious dimensions.

The concept of drugs is not solely about narcotic substances, whether natural or manufactured; it is also about behaviors and practices in which several factors intertwine, including individual and subjective factors and others that are objective. Understanding this term aids in predicting the appropriate way to treat and confront it.

## **Lecture No. 02: Classification of Drugs**

The scourge of drugs is one of the negative social phenomena that threatens societies in terms of security, public health, and even the stability of society itself. The technological advancement and social changes that have affected the entire world have brought about developments that were not all beneficial to humanity. These changes have impacted manufacturing and refining in various industries, including medical and therapeutic materials. Among these materials whose nature has changed are those previously used in medicine, treatment, and anesthesia, which have become dangerous substances consumed unconsciously by youth and even children.

This highlights the necessity of recognizing these new chemical compositions, which are originally plants or natural substances that have been re-processed to achieve euphoria easily and for a longer duration, without awareness of their risks to human health.

### 1. Classification of Drugs:

The importance of knowing the types and classifications of drugs lies in the fact that it is the fundamental entry point for understanding their modes of action, methods of dealing with them, and strategies for treatment and prevention.

Substances that cause addiction vary, especially when the use of these compounds or materials, whether natural or manufactured, is repeated. Some of these substances are used for medical purposes, while others are used for narcotic consumption purposes.

The types of narcotic substances are numerous, reaching a number between 800 and 900 types (Shaaban Attiyat, p. 21). Their classification methods also differ depending on the criteria used: some classify them based on their chemical composition, others based on their use, their nature, their narcotic capability, or their effect on the human nervous system. We will attempt to include their classification in the following table:

**Table No. (02): Classification of Drugs and Their Characteristics**

<b>Classification Axis</b>	<b>Type of Drug</b>	<b>Characteristics</b>
<b>Source</b>	<b>Natural:</b> Such as opium, hashish, Khat, marijuana,	Extracted from plants without chemical intervention.

	cannabis.	
	<b>Semi-Natural or Semi-Synthetic:</b> Such as heroin, cocaine.	Produced by chemical processing of natural substances.
	<b>Synthetic (Chemical):</b> Such as ecstasy, LSD.	Produced in laboratories by preparing chemical formulas; these are the most dangerous.
<b>Effect on the Nervous System</b>	<b>Depressants:</b> Such as alcohol, opium.	Calm nervous activity, cause drowsiness, and suppress respiration.
	<b>Hallucinogens:</b> Such as ecstasy.	Cause disturbances in perception and mental balance in humans, leading to hallucinations and general perceptual disorders.
	<b>Stimulants:</b> Such as nicotine, cocaine.	Activate the nervous system, causing either insomnia or hyperactivity, and affect the individual's dietary pattern.
	<b>Mild Stimulants:</b> Such as coffee, tea, some energy drinks.	Lead to physical habituation only, without apparent symptoms.
<b>Legal Status</b>	<b>Legal/Permitted:</b> Such as morphine, analgesics, certain tranquilizers, tea, coffee.	Used for therapeutic and medical purposes, and also used for domestic purposes.
	<b>Illegal/Prohibited:</b> Such as heroin, cocaine, hashish, methamphetamine.	Legally prohibited due to their negative effects on the body.
<b>Habituation and Addiction</b>	<b>Nicotine, Tobacco, Juniper Cigarettes</b> (which are herbs).	<b>Psychological habituation only,</b> without clear physical symptoms.
	<b>Coffee, Tea.</b>	<b>Physical habituation only,</b> without clear psychological symptoms.
	<b>Psychological and Physical Addiction.</b>	These create <b>complete psychological and physical dependence</b> and cause <b>withdrawal symptoms</b> upon cessation of use.
<b>Method of Use</b>	<b>Oral Intake:</b> Includes all types	Their effect is relatively slow, and

	of drugs taken by mouth.	their potency is quickly dissipated.
	<b>Injection:</b> Such as liquid heroin or <i>shoushana</i> (a street term for a certain preparation).	Their effect is rapid because they travel directly with the blood to the brain, and their potency is long-lasting compared to those taken orally.
	<b>Inhalation/Sniffing:</b> Such as cocaine.	Their potency is also long-lasting, and they are easy to use compared to injection, leaving no external physical trace.
	<b>Auditory Intake:</b> Such as digital drugs.	Achieve an immediate effect, but the potency lasts for a specific, limited duration.

**Source:** Merghad Zineb

There are also those who classify them according to their level of danger:

A. **Major Natural Drugs:** These include opioid and non-opioid analgesics, stimulants, and hallucinogens (such as hashish or cannabis, heroin, cocaine, Khat, marijuana, and volatile solvents).

B. **Minor Drugs:** Some of these are natural, such as stimulants (coffee, tea, or what is called caffeine, coca, nutmeg), and some are synthetic, such as tranquilizers and hypnotics (Rifaat, 2024, p. 57), without forgetting the stimulants, whether natural or manufactured.

C. **Digital Drugs:** These are a type of music or sound waves with the ability to cause mood or brain changes that lead to loss of consciousness or mental obscuration.

Some researchers classify them according to the degree of their effect on the body:

- ❖ **Opiates:** Such as heroin, morphine, and methadone.
- ❖ **Stimulants:** Such as amphetamines and cocaine.
- ❖ **Sedatives:** Such as barbiturates and methaqualone.
- ❖ **Hallucinogens:** Such as L S D, mescaline, and psilocybin.
- ❖ **Dissociatives:** Such as phencyclidine, PCP, and ketamine.

- ❖ **Inhalants:** Such as acetone, benzene, and glue.
- ❖ **Cannabis:** Such as hashish and marijuana (Shaaban Attiyat, p. 22).
- ❖ **Alcoholics:** Such as ethanol, barley, and grapes.

These classifications are generally agreed upon worldwide, but some types may be included or fall under prohibited substances in certain countries while being legal in others. Even the classification itself may vary: some countries classify or list hashish and cocaine under the category of narcotics, whereas the World Health Organization considers hashish to be a hallucinogen and cocaine a stimulant.

These classifications highlight key perspectives for categorizing drugs. Some focus on their nature or source, derived from herbs and plants, which were used in treatment before the emergence of manufacturing and the addition of chemical compounds or materials that change their nature, making them semi-synthetic or fully manufactured. Although all of them affect the human body directly or indirectly, some researchers have classified them according to the degree of the medical effect of these components:

- ❖ **Depressants**, which lead to the alleviation and reduction of vital human functions.
- ❖ **Hallucinogens**, which cause cognitive disturbance and detachment from reality, making control over behaviors difficult and actions unpredictable. These are among the most dangerous drugs because their effect is not only individual but extends to the group and society.
- ❖ **Sedatives**, and **Stimulants/Psycho-stimulants**, which grant a state of temporary activity that, after prolonged use, leads to psychological disorders. This classification is one of the most widely used in medicine in general and psychiatry in particular.

The classification based on legal permissibility draws attention to the fact that there are substances, which are narcotics, but are considered legal if used in their proper context. This is especially true since most of these substances are used in treatment or pain relief, such as morphine, provided there is no misuse or illegal diversion. Conversely, legally prohibited substances are those whose behavioral effects on the individual are negative, whether for the individual themselves or for society in general. Legally, anyone who uses, traffics in, or even possesses them without consumption may be penalized.

The classification based on the degree of habituation and addiction highlights the behavioral and physiological dimension of narcotic substances, providing three degrees of dependence: psychological dependence only, physical dependence only, and both psychological and physical dependence. This classification revolves around the extent of the person's connection to the narcotic substance and the most important changes these substances cause, either psychologically, physically, or both simultaneously—the latter being the most dangerous, as it causes withdrawal symptoms upon cessation of use, typically necessitating specialized addiction centers for recovery.

The other classifications, which revolve around the method of use, are also among the most important ways that help specialists build general strategies to eliminate them or prevent their symptoms. Any attempt to study these substances requires the integration of all dimensions surrounding this phenomenon.

## **Lecture 03: Types of Drugs**

### **1. Natural Drugs:**

Natural drugs are considered among the most dangerous narcotics due to the health damages they cause to the human body, the family, and society. They include all natural plants and herbs such as opium, hashish, cannabis, Khat, and marijuana. These herbs were historically used for therapeutic purposes and for pain and wound relief. Studies indicate that the medical use of opium dates back seven thousand years before Christ. It was used to treat colic in children and was also known as the medicine that soothes pain, relieves anger, and erases the effects of grief from memory (Rifaat, *Ibid*, p. 15).

❖ **Opium:** This is a white sap extracted from a plant called the poppy. Its color then changes to dark brown, and it has a strong odor and a bitter taste. The Single Convention on Narcotic Drugs of 1961, as amended by the 1972 Protocol, defined it in its first article as the coagulated sap of the opium poppy (Rifaat, *Ibid*, p. 16). This substance is extracted from the head of the plant, where it is scored, and this liquid white milky substance emerges. After contact with air, its color turns dark brown. Historically, it was taken orally, but with scientific development, it is now taken by injection after being dissolved in water.

❖ **Morphine:** This is a natural opioid substance extracted from the *Papaver somniferum* poppy plant. It is considered one of the most powerful natural analgesics for pain and is used medically to treat severe and chronic pain. However, it is classified as a dangerous narcotic substance due to its high potential for causing habituation and then addiction (Ben Ali Al-Maliki, 2018, p. 101). It is a white powder extracted from parts of the poppy plant and is one of the most important pain-blocking substances, especially in surgical operations or for cancer patients. Conversely, it is used as an extremely dangerous narcotic, typically used by addicts through injection. Its effect begins by inducing a state of relaxation, euphoria, and nerve anesthesia. However, repeated use leads to addiction, and withdrawal symptoms appear shortly after cessation, such as anxiety, sweating, depression, insomnia, convulsions, and acute pain.

❖ **Cannabis:** This is the general name for the plant from which hashish and marijuana are extracted. In some literature, it is called Indian Hemp. Its various parts contain active substances that affect the brain, such as THC. It has several medical and industrial uses (Khalifa, 2019, p. 142), and its use is not confined only to the medical or anesthetic fields but is also used in the production of fibers and oils.

❖ **Hashish:** This is a substance extracted from the resin of the Indian Hemp plant. It is one of the oldest narcotic substances, used for medical, religious, and

recreational purposes. It affects the central nervous system and leads to psychological and physical changes that can result in addiction (Abdullah Majid, 2014, p. 87). It is one of the most widespread narcotic substances due to its easy accessibility, low cost, and simple use.

❖ **Marijuana:** This is a narcotic extracted from the dried leaves and flowers of the cannabis plant and contains the substance Tetrahydrocannabinol (THC), which is responsible for the psychoactive effect. It is one of the most widely circulated narcotic substances in the United States and some Western countries (Abdullah Al-Shammari, 2016, p. 113). It differs from hashish in terms of method of use, preparation, and even degree of effect; it is less dangerous than other substances, and some US states do not penalize its use. However, most studies have proven that it causes psychological disturbance and many cognitive problems, sometimes leading to acute depression, especially with prolonged use.

❖ **Khat:** This is a plant cultivated in regions of the Horn of Africa and Yemen. Its fresh leaves are consumed by chewing and contain stimulating substances such as cathinone and cathine, leading to feelings of euphoria and stimulation. Just by chewing its leaves, the user feels satisfaction and happiness and does not feel hunger. After the effect wears off, the individual's mood deteriorates, resulting in mental sluggishness, a feeling of lethargy, weakness, and depression (Rifaat, *Ibid*, p. 31). However, its long-term use causes addiction, loss of appetite, and digestive system disorders (Hammoudi, 2012, p. 156). It is a substance consumed habitually in some countries and is not penalized by law, but its effects fall under the effects of narcotics as it causes an imbalance in the mental and psychological equilibrium of the individual, and habituation to this substance leads to addiction.

❖ **Cocaine:** This is a natural substance extracted from the coca plant. Its leaves are chewed or kneaded and dried to extract cocaine powder, which is inhaled or injected intravenously to increase its efficacy. It is now also being combined with other narcotic substances to achieve a greater effect. It is a very dangerous substance to the human body, psychological health, and nervous system.

The most important plants from which drugs are extracted are: Poppy, Indian Hemp, Coca, Khat, and Tobacco.

## 2. Semi-Synthetic Substances:

❖ **Heroin:** This is also a derivative of morphine and is two to ten times more potent depending on the quantities used. It is considered one of the most dangerous narcotics due to the high number of users and the speed of addiction. It is a crystalline white powder extracted from the poppy plant after its sap is dried, and its smell closely resembles that of vinegar (Rifaat, *Ibid*, p. 18). It was also used in medicine but was abandoned due to the severe harms observed during treatment.

There are also other therapeutic substances extracted from the poppy plant that are used in treatment but become narcotic substances if used illegally.

- **Codeine:** Used as a substance to soothe coughs.
- **Thebaine:** Was previously used to treat colic in children (Rifaat, *Ibid*, p. 19).

Although the discovery of these substances was accidental and they were initially used for treatment and pain relief, their uses evolved to later become dangerous substances to the human body, the family, and society.

### 3. Manufactured or Synthetic Drugs:

These are substances that have been synthesized from natural narcotics. They are prepared in laboratories through chemical reactions and materials extracted from natural herbs and plants. They are pharmaceutical substances created for therapeutic purposes or to stimulate the individual, vitalize their daily activities, reduce the feeling of fatigue, and improve the functional efficiency of the body and mind. However, their misuse, especially chronic use, ultimately leads to addiction. They include:

❖ **Amphetamines:** These are synthetic and manufactured substances that stimulate the nervous system. They are medically used to treat certain behavioral disorders such as hyperactivity or attention deficit and dispersion. However, when used illicitly, they are also used as addictive narcotics. Their most significant effects include brain damage and hallucinations. Key names used for this term include:

- ✓ **Speed** (the commonly traded name in the drug market).
- ✓ **Methamphetamine.**
- ✓ **Adderall**, prescribed for treating hyperactivity.
- ✓ **Dexedrine**, a powerful stimulant.

They are often consumed orally or intravenously, but they are classified as psychoactive substances, leading to the prohibition of their circulation and the imposition of control over their consumption even when used for treatment (Rifaat, *Ibid*, p. 39).

There are some natural substances used normally in human life, but they are considered narcotic substances if used in large doses, such as nutmeg and clove. There are also natural stimulants like coffee, tea, caffeine, and coca. These are natural substances whose main properties are to stimulate the human nervous system, giving a boost of activity and energy and increasing concentration. They are commonly consumed by workers, homemakers, and students, as mentioned, to provide vitality and increase the desire to work or to help stay awake. It is noteworthy that as soon as the user stops consuming caffeine—the common factor in these substances—some physical symptoms, similar to but less severe and dangerous than withdrawal symptoms, begin to appear, such as headaches, loss of concentration, lethargy, blurred vision, and changes in the individual's mood. Caffeine was classified as a prohibited narcotic in many decisions, though these were later reversed, especially given the widespread consumption of these substances and their large scope of distribution.

❖ **Hallucinogens:** These are a group of chemical substances that cause mental disorder with disturbances in cognitive activity and perceptual dysfunction. These substances create psychological dependence and directly affect the central nervous system. The user experiences auditory and visual hallucinations and a complete sense of detachment from reality. The most famous include:

✓ **Lysergic Acid Diethylamide (LSD):** This is one of the most hallucination-inducing substances. It is a chemical that, immediately upon entering the human body, results in strong visual hallucinations and disorientation of time perception.

✓ **Mescaline:** Extracted from the Mexican cactus or peyote. It is consumed orally or by smoking and causes visual hallucinations less potent than LSD. The user sees bright colors with a profound sensory change and experiences a feeling of euphoria, leading to psychological addiction.

✓ **Psilocybin:** This is also a narcotic substance that causes addiction if used illicitly, leading users to visual hallucinations such as blurred vision.

✓ **Phencyclidine (PCP):** A hallucinogenic substance that affects the nervous system and can cause mental dysfunction.

✓ **Ketamine:** A chemical substance typically used as a veterinary animal treatment. It causes detachment from reality and memory disturbance, and also results in loss of consciousness.

✓ **MDMA or ECSTASY** (Scientific name: Methylenedioxyamphetamine): Also called the "happiness pill," it is a stimulating hallucinogen. It is prescribed as a nerve tranquilizer or for severe insomnia, targeting dopamine and serotonin to induce strong feelings of exhilaration and happiness. It leads to dangerous psychological addiction for the individual, family, and society. With repeated use, it can lead to the collapse of vital body organs and kidney failure, and definitively results in acute depression and psychotic and mental illnesses.

✓ **Pregabalin** (or Lyrica): Usually prescribed as a nerve sedative and narcotic or for cases of epilepsy, with a medical prescription and for a studied, limited period. It causes drowsiness and euphoria, and leads to poor physical coordination. However, if its use is prolonged, whether legally or illegally, it definitively leads to psychological and physical addiction alike.

#### **4. Volatile Solvents or Inhalants:**

These are among the most dangerous types to the body. Despite their widespread use among children and adolescents—due to their easy accessibility and low cost—awareness of their dangers is barely visible compared to the scale of their spread, especially in impoverished neighborhoods and schools.

These are synthetic chemical substances characterized by their rapid evaporation and easy volatilization into the air. Upon inhalation, the user achieves a feeling of euphoria that directly affects the brain and central nervous system, potentially leading to poisoning. They include:

– **Glue**

– **Paint**

– **Nail polish remover** (Acetone)

– **Gasoline** (Benzene)

– **Lacquer**

– **Butane** (Lighter fluid)

– **Cleaning fluids** ("Chloroform" / Disinfectants) (Sabri, 2021, p. 109).

These substances are used by direct inhalation from the container (sniffing) or indirect inhalation (bagging), where they are emptied into paper or plastic bags or applied to a piece of cloth before being inhaled (Nasr, 2018, p. 174). They cause dizziness and rapid euphoria along with balance disturbance and hallucinations. They also lead to brain damage and weakened memory and concentration. Crucially, they can cause sudden cardiac arrest even after a single use.

## **5. Digital Drugs:**

This is a contemporary topic that has entered the field of addiction. They are a type of audio file containing binaural beat frequencies. It is believed that they affect the brain in a way that mimics the effect of certain traditional narcotics by listening to them through headphones for specific periods, causing changes in consciousness, mood, and psychological state (Abed, 2022, p. 133).

Their effect relies on two different sound frequencies transmitted to the ears, which prompts the brain to attempt to reconcile them. This leads to states of altered consciousness, deep relaxation, or mental stimulation depending on the type of frequency. It is claimed that their effect resembles that of hashish, cocaine, ecstasy, or LSD depending on the frequency pattern (Al-Faraj, 2021, p. 98). They were used in the past for patients suffering from mild depression or those who refuse drug-based treatment, where they were treated using electromagnetic sound waves to subsequently trigger the secretion of mood-regulating substances.

These drugs target youth, internet addicts, or individuals suffering from depression and psychological isolation.

They are accessed by downloading specialized applications and tones and are listened to in a calm environment, with sessions lasting approximately 10 to 30 minutes.

Despite their multiple, scientifically proven risks, no explicit legal texts currently exist to criminalize them. This poses a great danger because their effect is largely equivalent to that of consumable narcotics.

Despite the differences and diversity in drug types, they all share similar effects aimed at inflicting harm on the individual themselves, the family, or society. Knowing the types of these narcotics makes it easier for specialists to treat them and eliminate their

effects, as well as facilitating their prevention and the construction of an effective strategy and policy for prevention at the individual, familial, and social levels.

## **Lecture 04: Stages of Drug Use**

For an individual to become a drug user, they typically pass through several stages, which are outlined as follows:

### **1) Experimental Stage:**

This is the first door the user opens to the scourge of drugs. Initial use is usually driven by curiosity or the desire to belong to a peer group. It typically occurs without the intention to continue; the individual is unaware they will become dependent. Consumption is usually irregular, and there is an absence of physical and psychological dependence. At this stage, the body has not yet become accustomed to the substance, allowing the individual to stop using it without experiencing withdrawal symptoms. However, because the individual often does not realize the inherent dangers, they frequently continue taking the substance.

## **2) Irregular Use Stage:**

In this stage, the individual begins to use drugs intermittently, not continuously. Use is typically limited to social gatherings with friends on weekends, holidays, or celebrations. The user is not strongly attached to the substance at this point, and they can abstain from it for a period with no or only minor symptoms that do not affect their general health.

## **3) Regular Use Stage:**

Consumption now becomes continuous and systematic at specific times. Physical and psychological adaptation to the narcotic substances begins. At this stage, the user consistently rationalizes their use, and their moral responsibility regarding drugs diminishes. The possibility of stopping and reverting remains, despite the difficulty, and it typically does not yet require therapeutic intervention.

## **4) Habituation and Dependence Stage:**

The individual begins to use drugs not out of desire, but out of an urgent psychological and mental need. These substances start to exert their full influence, causing feelings of euphoria, relaxation, calm, and happiness, and resulting in mental obscuration and loss of control over perception and awareness of reality. This causes the user to become attached to the drug and constantly preoccupied with it, striving hard not to run out. Psychological dependence becomes very clear, and if the drug is unavailable, signs of anxiety and mood swings begin to appear. The stage of addiction begins here.

## **5) Addiction Stage:**

At this point, use transitions into psychological and physical attachment, and drugs become a biological necessity. The user in this stage cannot stop without therapeutic intervention. Withdrawal symptoms appear upon cessation of consumption, leading to the breakdown of the body and the deterioration of its organ functions. The longer the duration of use, the less effective the consumed dosage becomes, pushing the user to increase the dose, which ultimately leads to death by overdose.

### **6) Collapse Stage:**

This is the final stage experienced by the user. The individual becomes incapable of performing their daily functions and is completely incapacitated without the use of drugs. All vital bodily functions are affected, as are internal organs like the heart, kidneys, and liver, leading to chronic or dangerous diseases. The mind loses its cognitive abilities, and the person enters a spiral of psychological disorders often escalating to insanity. Furthermore, in the pursuit of even a single dose of narcotics, the individual may resort to murder, theft, and other crimes. At this stage, the person loses all social skills, including communication and the ability to build family or professional relationships, often culminating in death.

## **Lecture 05: Characteristics of Drugs**

Drugs are among the most significant phenomena that have troubled specialists across various orientations and disciplines, especially recently. The wide spread of this phenomenon across all segments of society has sounded the alarm for humanity. It is no

longer a problem of a single country or community but has become a global issue threatening the social structure of individuals. To analyze any social or health phenomenon, we must first understand it through its essential characteristics and features. Narcotic substances are not merely a collection of chemical compounds or natural extracts; they are a complex system with common psychological, biological, social, and behavioral characteristics that ultimately cause changes in the individual's psychological, cognitive, behavioral, and physiological structure.

To attempt to explain these changes, we must first deconstruct the characteristics of this phenomenon so that we can control and manage its efficacy and spread.

### **1) Acquired Property (Not Innate):**

Drug addiction is acquired, and drug use is a trait a person is not born with. Instead, it is the result of experimentation and repetition, which generates a physical and psychological bond. This habituation evolves, causing the person to lose self-control, which leads to addiction. This is not innate or hereditary; even if a mother uses drugs and transmits them to her fetus, the child will not be an addict in the future.

### **2) Direct Effect on the Nervous System:**

One of the most important common characteristics linking all types of drugs is their impact on the human body, specifically their effect on the Central Nervous System. Prolonged drug use leads to the disruption of the normal performance of bodily functions, affecting a person's perception, consciousness, and behavior, either through inhibition, stimulation, excitement, or even hallucination. These harms can extend to affecting the individual's mental capacity, causing damage to the brain, memory, concentration, and even attention. This is in addition to the mood changes caused by the consumption of such substances, depending on the type of substance and its compounds. This effect is not temporary; with repeated use, drugs become part of the brain's routine for experiencing euphoria, relaxation, and comfort. In the absence of the substance, the body triggers reactions called withdrawal symptoms, which vary according to the duration of use and the composition of the drugs consumed.

### **3) Habituation Property:**

The term habituation suggests that an action is repeated until it becomes a custom, which is what happens with drug use. With repetition, the body adapts to the presence of the narcotic substance, such that the concentration and effect of the substance become necessary for the user. Over time, however, the effect of the drug gradually diminishes, which drives the user to increase the dosage repeatedly to achieve the previous desired effect. This ultimately leads to addiction, which starts from an experiment driven by curiosity. The user becomes unable to dispense with the substance in their body, and if consumption is suddenly abandoned, the individual becomes susceptible to behavioral changes, regardless of the changes occurring physically or psychologically. Habituation is not only physical but also mental, known, as previously mentioned, as the withdrawal symptoms of drug use.

#### **4) Addiction Property:**

Addiction is a complex pathological condition that includes two elements: physical dependence (withdrawal symptoms) and psychological dependence (a compulsive desire for use), where the desire turns into an urgent need that dominates the individual's life and pushes them towards disordered behaviors to obtain the substance, negatively affecting their health, relationships, and social standing (Abu Zaid, 2020, p. 88).

Addiction is the stage that surpasses habituation, evolving into a psychological and behavioral disorder that accompanies the user. Upon reaching this stage, it becomes difficult to control and manage the user's behavior, and they lose the ability to make conscious decisions. They become a willing slave to what they consume, and their entire life revolves around how to find and use the drug. They do not care if they lose themselves, their life, their money, their family, or their job. The user cannot resist the urge to use, even if it costs them their honor, dignity, and life, going so far as to commit murder or theft to afford the cost of a single dose of drugs.

#### **5) Multiplicity of Effects:**

The effect of drugs extends beyond the brain to affect all internal and external organs of the body. This includes vital human systems, either disrupting them or reducing their effectiveness, such as the heart, kidneys, or liver, with a very strong impact. This is in addition to the digestive system, where appetite is either suppressed or increased. They

also affect the nervous system and the immune system. Studies have also proven their strong effect on the human reproductive system, and they cause many types of cancers.

### **6) Variation in Effect Among Individuals:**

The effect of the same substance varies from person to person depending on gender, age, physical constitution, genetic predisposition, psychological state, and the type of narcotic (Al-Suwaidi, 2021, p. 137). This explains why some people become addicted quickly while others are not affected at the same speed.

Narcotic substances do not affect all users with the same intensity, although most drug effects are immediate and temporary, bringing about euphoria, relaxation, and loss of perception—which is what most users seek to escape reality. However, they differ from one person to another. The differences in biological nature, individual psychological differences, and even genetic factors that distinguish one person from another also play a significant role in drug addiction. The brain's response to these substances also varies. For example, the effect of caffeine: some are affected and suffer from insomnia, difficulty sleeping, or heart palpitations, while others who consume it are unaffected by the substance even in large quantities. The rate of response to narcotic substances differs from one person to another, just as it differs from one physiological and psychological nature to another.

### **7) Impact on Society:**

One of the most important features of this phenomenon is its potential impact on society. Drugs are a dangerous negative phenomenon that erodes society, destroying its bonds and fabric. Their effect does not only ruin the user but extends to the family and then to society.

The wrong behaviors resulting from drug use are not isolated individual effects—such as theft, violence, lying, and isolation. They first affect the individual and then extend to the family, which attempts to contain them if possible. If containment fails, these behaviors logically spill over into society, threatening its stability. This translates into crime, domestic violence, social assaults, school dropout, theft, and violations. At some

stage, the user becomes a problem in themselves, not to mention becoming a burden on society.

### **8) Ease of Promotion and Rapid Spread:**

The social environment plays an important role in the spread of negative phenomena and scourges within society. As long as the social environment has the capacity to harbor such scourges, poor and fragile environments usually become a breeding ground for their spread. A key characteristic of drugs is their easy spread. We must not overlook that most drug users are adolescents who often try to rebel against society or prove themselves, making them easy targets for being lured into this prohibition. The absence of good role models and their replacement by those with influence and drugs paves the way for this group to enter this world. Economic fragility and cultural void can cause this scourge to spread like wildfire. We must also consider the lack of role of mosques and the weak supervision of the family and school, as well as the exploitation of technological and media means for their promotion. All these factors contribute to the expansion of the scope of drugs and their consumers.

### **9) Difficulty in Control and Management of Use:**

The individual loses the ability to stop consuming drugs, especially if they have reached the addiction stage, where therapeutic intervention is necessary for cessation.

### **10) Association with Deviance and Crime:**

The most prominent feature of drugs is their strong association with crime. The user resorts to all types of crime to secure the drugs, ranging from theft to violence and even murder. We will now summarize all these characteristics in a table:

**Table No. (04): Characteristics of Drug Use**

<b>Characteristic</b>	<b>Description</b>
Effect on the Central Nervous System	Their effect is direct on the brain.
Habituation	The longer the duration of use, the less effective the

	substance becomes, which necessitates increasing the dosages.
Physical or Psychological Addiction	Achieved upon reaching the stage of inability to dispense with the substance psychologically/mentally and physically.
Multi-Dimensional Effect	Drugs target most bodily systems and behaviors and are not limited to the nervous system alone.
Variation in Response	Their effect differs from one person to another.
Negative Impact within Society	They lead to very serious social problems.
Ease of Promotion and Rapid Spread	They are easy and quick to spread and target susceptible demographics.
Difficulty in Controlling Use	Achieved if the individual reaches the stage of regular use and addiction.
Association with Negative Phenomena in Society	Drugs are typically linked to crime, deviance, and violence.

The characteristics of drugs are not limited solely to their direct impact on the body or the psyche. They extend to encompass many surrounding dimensions, making their prevention and combat require the concerted efforts of all health, legal, security, and social entities. Understanding these characteristics facilitates therapeutic intervention and the elimination of this scourge.

## **Lecture 06: Theories Explaining the Addictive Behavior of Drug Users**

To understand drug addiction, various theories—social and psychological—have been developed to explain the mechanisms driving this behavior.

### **1. Social Theories:**

#### **1) Structural-Functional Theory:**

Key proponents include Émile Durkheim and Robert Merton. This theory views society as composed of institutions that work harmoniously to maintain order. The

deviation of some individuals from recognized social norms is attributed to a failure or weakness in these institutions.

This theory interprets addiction as a failure to perform expected social roles and as a deviant behavior that violates shared expectations accepted as legitimate within the social system. The conflict an individual experiences due to contemporary living conditions and the difficult-to-achieve roles expected of them causes the person to lose their social equilibrium, leading them to resort to drug use and subsequent addiction (Ben Abdellah & Ben Ali Al-Jawadi, 2014, p. 83).

Merton suggests that drug use can be a form of "innovation." When individuals are unable to achieve social integration and the goals set by society through legitimate means, they resort to achieving them through illegitimate means, including drug use. Drugs, therefore, express a flaw in the value structure and a lack of equal opportunities, pushing individuals toward deviance.

## **2) Social Learning Theory:**

Prominent contributors include Edwin Sutherland (1931), Gabriel Tarde, and Albert Bandura. This theory posits that human behavior results from a sequence of social experiences that teach the individual the meaning of the behavior, along with an awareness of the judgments in situations that determine whether the activity is possible or desired. Any behavior a person learns follows two principles: observation and imitation. A behavior learned is a behavior previously acquired and retained because the individual anticipates that this behavior will lead to the reinforcement of value. Positive reinforcement of behavior encourages repetition. In this sense, deviance is learned behavior aimed at overcoming failure and achieving success, which includes drug use and substance consumption (Rifaat, Ibid, p. 85).

In other words, the theory holds that the behaviors individuals exhibit are an imitation of their surroundings, learned through observation, then imitation, then positive assessment and reinforcement. When an individual observes that their surrounding environment—whether family, friends, or even celebrities they consider role models—uses drugs and receives social acceptance from the group, they imitate them. Modern media and technology contribute to this, as many youth and adolescents imitate what they see or what

is promoted through these means because they see the users occupy a prominent place in society. This highlights the role of role models or the reference group in shaping and crystallizing deviant behaviors, specifically addictive behavior.

This theory confirms that human behaviors are learned from others through imitation and association. It explains drug use and addiction as a learned behavior resulting from associating with the reference group. The individual continues using to feel a sense of belonging to the group, and the group supports this behavior to affirm that the user is one of its members bound by the special connection of drug use behavior (Ben Abdellah & Ben Ali Al-Jawadi, Ibid, p. 83).

### **3) Social Disorganization Theory:**

A key proponent is Clifford Shaw (often associated with Clinard). Shaw posits that deviant behavior is behavior with a contradictory or opposing orientation to the standards accepted by society, to the extent that the behavior exceeds the limits of societal tolerance. Social disorganization explains drug addiction as a social problem caused by the addict's deviation from the standards and values established by society (Ben Abdellah & Ben Ali Al-Jawadi, Ibid, p. 74).

This theory attributes crime and deviant behavior to specific environmental and social conditions within communities or neighborhoods. Societies suffering from weak social ties and a lack of social organization are more susceptible to the emergence and growth of abnormal behaviors like crime and drugs. When social ties weaken among community members, the influence of other social institutions like the family and school also diminishes. This causes social disintegration among the population, creating a fertile environment for deviance. Furthermore, the conditions of life—such as poverty, homelessness, and unemployment—play a significant role in deviance, creating a favorable space for the development of deviant behaviors and crime. The absence of social control and effective social institutions capable of absorbing these behaviors (like associations and clubs) increases the disintegration of social ties and the probability of deviance spreading. The void surrounding community members compels them to resort to all abnormal means.

### **4) Labeling Approach:**

A prominent leader is Howard Becker. This theory argues that society contributes to deviant behaviors. In this view, use does not become deviant behavior until the person is labeled by society as a deviant or described as an addict. Society plays a major role in classifying individuals; when a person is labeled as a criminal or deviant, this individual begins to adopt all the behaviors associated with that label. For a simple example, if society labels a person as a failure, they will automatically find themselves adopting any path that leads to failure. This theory asserts that labeling individuals as deviants or addicts by society leads them to adopt this identity and engage in addictive behavior. When an individual is treated as a deviant, they begin to act according to this description, which reinforces their drug use instead of reversing it (Mahdi, p. 94).

The internalization of this behavior often begins after society notices an abnormal or non-traditional behavior and labels the person with this term, which pushes them to adopt this role, integrate into it, and practice it.

Society, in this context, produces deviance by causing the individual to adopt the behavior with which they were labeled and treating them based on that label. This theory emphasizes that society plays a major role in interpreting individuals' actions and contributes, directly or indirectly, to the continuation of abnormal behaviors. This theory does not focus on explaining the initial use or deviance or how the individual first engaged in the behavior; rather, it explains the continuity of adopting this behavior and that the exclusion and marginalization the individual receives from society are what make them cling to this label.

#### **5) Social Contract Theory:**

Key proponents of this theory include Thomas Hobbes, John Locke, Jean-Jacques Rousseau, and Émile Durkheim. This theory interprets deviant behavior as a social phenomenon resulting from the coercion and domination exerted by individuals over one another. Poverty, for instance, generates a rejection of the social values and ethics that individuals believe in, viewed as a reflection of social injustice among groups (Ben Abdallah & Ben Ali Al-Jawadi, Ibid, p. 74).

This theory posits that humans live in a natural state devoid of controls and voluntarily accept submission to authority in exchange for guaranteed security and order.

Therefore, drug use is considered a breach of this social contract that links the individual to society. The user implicitly refuses to comply with the laws that criminalize these substances and threatens the safety of others, necessitating the state's adoption of punishments imposed on them and their compulsory subjection to treatment.

### **6) Urban Ecology Theory:**

This theory suggests that the urban environment in which people live has a profound effect on creating a deviant environment. Overcrowding, slums, lack of services, instability, insecurity, and high unemployment—all these factors create a social void, pushing the individual toward deviance and crime to cope with severe pressures.

## **2. Psychological Theories Explaining the Phenomenon of Drug Use:**

This perspective includes a set of theories that explain the psychological phenomenon of drug use and addiction:

### **1) Behavioral School:**

This theory assumes that addiction and use are acquired behaviors learned through continuous and repetitive habits. Therefore, it focuses on the causality of drug use to find solutions and establish treatment techniques. This theory states that regardless of whether the behavior an individual engages in is normal or abnormal, it is a result of learning. The principle is that with the repetition of the behavior, it becomes a habit when it is rewarded, and individuals will refrain from any behavior that is not rewarded or is punished (Gaddah et al., 2023, p. 495).

According to this theory, there are many factors, some external—such as frequenting places that reinforce euphoria or use, or being with friends who support these behaviors—and others internal—which drive the individual to resort to drugs as solutions to certain problems, crises, or circumstances they are experiencing, especially emotional ones, with the intention of escaping reality.

Proponents of this approach identify three ways in which addictive behavior is learned:

## 2) Learning Theory:

In this context, use is based on the repetition of behaviors craved by the individual, which becomes a behavioral pattern difficult to change. This can be explained through:

**a) Classical Conditioning:** This component explains addiction symptoms, such as craving for the drug or feeling euphoria upon use, which reinforces the use. The more pleasure, the greater the desire for use and the repetition of the same behavior. This process has been explained through two models:

✓ **Compensatory Conditioning Model (Siegel):** Siegel suggests that the stimuli associated with drug use become paired with the effects produced by the drugs, aiming to produce a conditioned response contrary to the drug's effect. This compensatory response is designed to reduce the body's biological equilibrium, which increases the desire to continue drug use.

✓ **Conditioned Craving Motivation Model:** According to this model, the conditioned stimuli associated with the user's memory, such as the smell of the drug, the scent of the place, or the décor of the place where they use, can all trigger a longing for use. This state has the same effect as the drug itself.

**b) Operant Conditioning:** This conditioning focuses on the effects that follow the behavior. The euphoria achieved through use is continuous, and the harmful effects of the behavior do not appear immediately; rather, they take time to emerge or appear after cessation or lack of the drug. This motivates the addicted individual to continue using or even return to it after quitting.

**c) Modeling:** Here, role models and imitation are reinforced by observing the behavior of others, which provides positive reinforcement that drives the individual to use.

This idea is fundamentally linked to the theory of imitation and mimicry adopted by individuals in their social lives. Individuals tend to adopt behavioral patterns practiced by people they consider role models. As Ibn Khaldun said, "The vanquished is inclined to imitate the strong." The pattern chosen by the individual as a role model is imitated in all their behaviors, including use or deviant behaviors. We should also note that this theory supports positive actions as well.

Despite the attempts of many proponents of this theory to explain the addict's behavior, they have neglected the individual motivation in adopting this behavior. Despite all these justifications, many individuals, despite all the temptations, have not used, consumed, or become addicted to drugs.

### **3) Cognitive Theory:**

This theory links use with faulty thinking patterns, such as the belief that drugs improve the individual's mental and physical performance. They are also believed to regulate mood, soothe the psyche, and lead the individual to relaxation and a sense of psychological peace and comfort. The user firmly believes that drugs have the power to help them escape reality, forget all the bad circumstances they are experiencing, and transition them from a poor mood state to a better one where they feel less tension, anxiety, frustration, or anger. Proponents of the theory believe in the ability to modify thoughts, which are categorized into rational thoughts (all normal thoughts that achieve balance and psychological health for the individual) and irrational thoughts (all negative thoughts that carry emotional feelings and abnormal behavioral responses such as anxiety, fear, anger, or depression).

Here we emphasize the importance of awareness and changing negative convictions and ideas through therapeutic programs for the addicted or using individual's behavior.

This was affirmed by Aaron Beck's theory, which bases its explanation of this phenomenon on the importance of beliefs. He posits that individuals who have a positive attitude towards substance misuse possess distinct beliefs, such as the influence of a peer group that uses drugs, contact with substance dealers, or even residing in areas where this type of trade or consumption is prevalent. It also includes certain internal conditions like pessimism, depression, anger, or sadness (Al-Hajjar Hamdi, p. 46).

### **4) Psychoanalytic Theory:**

According to this school, drug use is a reaction to unconscious conflicts and disturbances the individual experienced during a stage of their life, particularly during

childhood and adolescence. The individual uses drugs as a defense mechanism to escape anxiety, compensate for the emotional deficit they experienced, or evade feelings of depression, a continuous sense of threat, and past experiences full of frustration. This creates aggressive feelings toward themselves and those they live with. To avoid feelings of helplessness, negativity, and the inability to tolerate psychological tension, pain, and frustration, the user resorts to drugs as a solution due to their inability to achieve gratification through normal channels. Based on this, the psychoanalytic school views the psychology of addiction as resting on the basis of:

a. **Psychological Conflicts:** Attributed to:

- ✓ The need for self-affirmation and self-assertion.
- ✓ The need for security.

Consequently, if the individual fails to resolve these conflicts, they resort to drug use with the motive of alleviating pain.

b. **Chemical Effects of the Drug:** This differentiates drug users. The user's psychological makeup plays a significant role in becoming addicted to one drug over another. Thus, the origin and nature of addiction are attributed to the psychological structure of the patient, which creates a state of predisposition. The role played by the drug's chemical effects and properties then follows (Gaddah et al., p. 495).

This theory provides a depth of understanding of the addiction phenomenon by linking it to the user's past and the buried psychological crises they endured. Although this theory attempts to justify addictive behavior and seek to treat it by addressing the psychological traumas suffered by the user, it relies on personal interpretations that are difficult to generalize and lacks empirical and applied evidence upon which to build an approach.

Despite the fact that all these theories have played a significant role in explaining the addictive behavior of the user—with proponents of each theory attempting to provide explanations according to their perspective—they all agree that the user is an abnormal individual at least during a specific life stage. They are a person who has not received positive emotions or learned the skills to cope with life pressures. If this behavior is

indicative of anything, it is the individual's loss of the ability to adapt to the self and to their surroundings.

## **Lecture 07: Causes and Factors Leading to Drug Use**

An examination of the theories explaining drug use behavior reveals that the backgrounds of use are numerous and diverse. Drug use does not result from a single cause but is the result of the accumulation of many genetic, environmental, economic, psychological, and social factors. These factors vary from person to person, from society to society, and even with the passage of time and the changes that affect society, the factors leading to use also change. The more these factors converge in a single individual, the higher the risk and the greater the probability of adopting deviant behaviors, of which use is one, if not the most dangerous.

### **1. Social Causes:**

#### **1) The Family:**

The family is the most important educational and socialization institution and the basic building block for forming the individual. It is also one of the most powerful factors that can contribute, directly or indirectly, to drug use and addiction, or to other abnormal behaviors the individual may adopt or pursue in the future.

❖ **Family Disintegration:** Problems occurring between parents, especially those taking place in front of children, or the termination of the marital relationship through divorce and separation, cause children to lose emotional security and psychological stability. This prompts some of them to search for alternatives to compensate for the deficiencies caused by the conflicts they experienced within the family, such as resorting to peer groups and seeking stability with them. This drives them to engage in behaviors practiced by their friends, such as drug use, to escape reality. This is often found among adolescents who live in a charged, unstable, or emotionally neglectful family environment, making them more susceptible to addiction compared to those living in a stable atmosphere.

❖ **Mistaken Upbringing:** Especially parenting styles based on physical violence and harshness in treatment. Everything the individual is exposed to within the family is retained and translated in the future into a set of behaviors reflecting what the individual endured.

❖ **Marginalization of Children or Emotional/Psychological Neglect:** The absence of affection, attention, and familial warmth, or indifference, leads the child to develop low self-esteem. This causes the child or adolescent to seek self-affirmation by adopting behaviors that draw attention to them, either within the family or in their social environment.

❖ **Weak Family Supervision:** When the role of one parent is absent, it creates a large space of freedom for children or adolescents, especially regarding their entrance and exit times from home, the duration of their time on the street, or even the freedom to choose their friends without guidance, supervision, or accountability, particularly concerning behavioral changes they undergo. This allows them to experiment with whatever they encounter out of curiosity or to imitate their friends. This also reflects a lack of communication and attention, creating an emotional gap filled by those who promote deviant behaviors within peer groups.

❖ **Poor Role Models:** The first signs of upbringing appear through the imitation reflected in the parents' behavior in their children's character. If one parent

engages in deviant behaviors, this will inevitably be imprinted in the child's mind as the role model. Here, the role model is not limited to one parent but is also embodied in the image of a sibling or educator, or the figure the child wishes to imitate through modeling, as confirmed by learning theory.

❖ **Excessive Pampering:** Exaggeration in raising a child, whether through pampering or suppression, creates an abnormal personality. This personality, accustomed to having all its demands met, cannot, in turn, bear the consequences of future pressures. This makes them susceptible to emotional fluctuation, leading them to resort to use to escape or express these pressures. A balanced and emotionally stable family that raises children with a moderate educational approach necessarily creates psychologically sound individuals, while any deviation from balance creates a troubled personality, whether through excessive pampering or excessive harshness.

❖ **Lack of Family Awareness:** A family unaware of the danger of drug use may not even pay attention to the symptoms of use in their children until the use reaches very advanced stages of addiction, which are difficult to treat in the future and may even lead to murder or suicide. The lack of family awareness deepens the ignorance exploited by those who promote drugs and opens the door for them to exploit their children.

❖ **Family Economic Level:** The financial level of families can play a fundamental role in children and adolescents adopting deviant behaviors. Poor families often expose their members to neglect, or the standard of living necessitates living in environments with high crime rates. A low economic level does not directly lead to use or addiction, but it provides an environment conducive to adopting abnormal behaviors.

## **2. Psychological Causes:**

Discussing the psychological causes of drug use leads us directly to the individual's psychological background and development, as addictive behavior often has psychological roots.

❖ **Weak Personality:** Individuals who suffer from low self-confidence also find it difficult to cope with life's pressures. Here, the individual resorts to escaping their reality by adopting behaviors that give them temporary peace, euphoria, or even happiness, such as use, which also grants them a sense of authority and control that gradually disappears when the drug's effect fades. This leads to repetition and subsequent addiction.

❖ **Psychological and Mood Disorders:** Such as depression or frustration, are primary causes of drug use. Depressed individuals resort to using substances that provide them with a temporary feeling of relaxation and happiness to alleviate the intensity of these feelings. Over time, the need for this temporary euphoria or comfort turns into complete dependence, contributing to the worsening of the user's psychological state.

❖ **Anxiety and Tension:** The pressures an individual experiences, especially with sudden changes in society, lead to anxiety or tension as they try to keep pace with the changes. Work pressures or fear of the future also push some individuals to seek calming behaviors to regulate their psychological state. Here, they resort to drugs or tranquilizers, which will later become narcotic substances the individual becomes addicted to in order to modify their mood.

❖ **Emotional and Psychological Void:** Individuals sometimes live in an environment devoid of goals or objectives to achieve. This state is called existential void and results when the individual loses meaning or the desire for anything. Here, the individual resorts to use as a tool to fill this void.

❖ **Curiosity and Desire for Experimentation:** The individual is naturally inclined toward exploration and experimentation, especially adolescents. This motive is often linked to self-assertion or the passion for imitation, eventually becoming a habit that is repeated whenever the opportunity arises, gradually turning into an addiction that is difficult to quit.

❖ **Personality Disorders:** This relates to specific personality types, such as the introverted or antisocial/hostile personality, due to poor control over emotions, resulting in a flaw in personality development.

❖ **Emotional Deprivation:** Some individuals suffer from harsh treatment in childhood with no display of love or appreciation. This feeling of deficiency will be compensated for through abnormal methods and by engaging in behaviors that fill the emotional void they feel.

❖ **Escape from Reality:** These behaviors emerge when the individual attempts to escape their reality, especially if they suffer from social rejection or are subjected to bullying. They resort to use to forget all these traumas and feelings, or because they have experienced psychological shocks such as loss, death, or failure, in an attempt to adapt to society to be accepted or to forget the negative feelings overwhelming them.

### **3. Economic Causes:**

Economic causes are among the most prominent factors explaining the phenomenon of drug use, especially in poor and developing societies. Poverty, unemployment, work problems, and low wages all contribute to drug use as a means of escaping these pressures, particularly among youth. The idea of studying for a long time only to face unemployment and financial void pushes some to rely on drugs to forget the failure in self-assertion and the inability to realize aspirations and ambitions (Gaddah et al., Ibid, p. 493). Conversely, financial affluence also drives drug use out of luxury or the pursuit of pleasure, indicating that drug use is not confined to the poor.

Economic shifts such as inflation and the high cost of living also serve as a driver for adopting deviant and addictive behaviors as a mechanism to escape these economic pressures.

❖ **Class and Social Disparity:** The social differences that arise between classes generate feelings of deprivation, resentment, and defeat. This pushes some to escape the reality of the class divide by using drugs as a refuge to hide behind, as a form of compensation or to release anger, or even to retaliate against reality.

❖ **Weak Development:** The absence of effective development policies that create job opportunities, combined with weak solidarity in the social fabric, all lead to the marginalization of large segments of society, especially vulnerable groups like youth. This economic fragility increases the likelihood of individuals fleeing to addiction as an alternative to the feeling of economic and social helplessness.

#### **4. Cultural and Media Causes:**

The absence of positive role models in society and the negative role played by the media compared to its potential positive role, coupled with weak awareness of the dangers of drugs and the spread of mistaken beliefs about their supposed benefits—all these factors have significantly contributed to the spread of a drug consumption culture. Furthermore, unhealthy openness to Western cultures has played a major role in their promotion. This is disseminated through social media and messages conveyed through films and television series. All these misleading images help confuse the mind of the recipient of these messages, portraying the methods of drug use or the pleasure or euphoria felt by the user, thereby creating a motive for experimenting with this feeling.

All these causes are fundamentally rooted in the symbolic and value system that governs the behaviors of individuals within society. Moreover, the openness experienced by nations has made youth accept alien behaviors imposed on them to keep pace with this openness. All this leads to a decline in normative values in society.

Furthermore, moving away from religion is a fundamental factor in adopting all forms of deviance. The weakness of religious deterrents and the distance from faith-based values constitute a major absence of religious control in society. Adherence to faith-based values is considered a protective factor that instills in the individual self-supervision and fear, keeping them away from adopting these behaviors.

## **Lecture 08: The Role of Socialization Institutions (Family, Mosque, School, and Media) in Addressing This Phenomenon**

The social and cultural changes in modern societies, and the transformations they have produced in the value structures of communities, have in turn resulted in a set of negative consequences and phenomena in society, and even for the family and the individual themselves. Drugs are not merely a phenomenon that harms health or causes psychological problems for the user; they extend beyond that to become a moral, social, educational, and security issue that threatens the cohesion and stability of society. Addressing this phenomenon necessitates the concerted efforts of all parties, starting from the family to the school to the mosque, without forgetting the media, which has become a fundamental pillar in prevention or confrontation of this phenomenon, given its alignment with the technological changes sweeping societies.

### **1. Concept of Socialization:**

Socialization is defined as the process through which culture is transmitted from one generation to the next (Badawi, 1977, p. 130). It is the method by which individuals are

shaped from their childhood so that they can live in a society with a specific culture, which includes what is imparted by parents, school, and society.

Parsons defines it as a learning process based on indoctrination and imitation aimed at integrating cultural elements into the personality structure (Al-Nayal Maysa, 2002, p. 27). It is a continuous, endless process.

Thus, socialization is the process through which the individual acquires the set of values, customs, and behaviors that contribute to achieving adaptation and help them interact with society through what they have acquired, beginning with the first institution: the family. The family is the initial nucleus where the individual learns right from wrong and sound behavior from unsound behavior, followed by the school, the mosque, civil society institutions, and the media and communication institution. The most important characteristics of socialization are that it is continuous, interactive, transmits culture and social values, is didactic, contributes to preserving the social and cultural heritage of the society, and serves as a means of social control that greatly contributes to maintaining the stability and cohesion of society.

## **2. Concept of Socialization Institutions:**

Socialization institutions refer to the framework through which the process of transmitting values, principles, norms, customs, traditions, and behavioral patterns that ensure the continuity of social systems and the cohesion of individuals within the social structure takes place. The socialization process begins from the moment of birth. The family is the first socializing institution where the individual receives the rudiments of behavior and values, where their personality is refined, and through which they begin to interact with their environment, acquiring the ability to adapt to their social and cultural surroundings. This is followed by the school, which is a formal, systematic institution for learning, without forgetting the role of places of worship—chief among them the mosque—and the media and communication, especially with the technological changes and their impact within society. All these institutions interact to form a fundamental pillar in shaping good individuals and instilling positive, protective values and principles that shield against behavioral deviations and enhance awareness and responsibility among individuals, especially concerning the drug phenomenon, which is a challenge facing contemporary and modern societies.

### **3. Role of Socialization Institutions in Addressing the Drug Phenomenon:**

#### **A. Role of the Family in Addressing the Drug Phenomenon:**

The family is considered the first nucleus for building society and the fundamental environment where the individual receives their initial values and life experiences. It is the first social setting where the child's personality is formed, their cultural identity is refined, and from which they acquire religious teachings and the first moral principles in their life through imitation and mimicry. It is the first institution of control in the individual's life and opens the doors for the child's initial integration, adaptation, and interaction with the surrounding society.

The more the family is sound, cohesive, and based on respect, dialogue, communication, and emotional support for the children—instilling in them confidence, altruism, and a positive outlook on life, imparting correct principles and values, and equipping them with the ability to confront pressures—the more successful the family is in protecting its children from deviations and use. Most cases of use and addiction begin when the family is troubled, lacking communication, and characterized by violence, neglect, authoritarianism, and failure to listen to children, leading to low self-esteem, which is one of the most important causes of resorting to drugs and deviance.

The responsibility the family bears is to produce a good citizen integrated into society. Parents strive to impart various behaviors that help the individual adopt sound paths in life, especially since the primary responsibility for deviance lies with the family. The danger of drugs is not limited to the individual alone but extends to the family, contributing to its destruction and the spread of crimes, loss, and deviations. Therefore, the most important duty of the family is the protection and social and familial immunization of children, which must be the basic principle instilled in parents' minds. Many parents believe that the surrounding social institutions, such as the school or mosque, are responsible for protection, and that the family's concern is limited to providing only material needs. Therefore, awareness of the great responsibility resting on the family as the pillar of society is crucial. Containment, dialogue, sitting and discussing with children, kindness, raising them with love, comfortable supervision over their behaviors, and

attention to their psychological well-being greatly prevent turning towards deviance or drugs, forming an impenetrable shield against use. The presence of role models in the home helps children imitate their behavior, especially the positive ones. The family must also manage the individual's free time to prevent boredom or experimentation out of curiosity or to fill a void. A sound family can absorb life pressures on individuals, whether encountered on the street, at school, or even within the family itself, especially since the family role is complementary between the mother and father, each according to their role and position within this structure. Neither parent should absolve themselves of the responsibility of upbringing.

### **B. Roles of the Family:**

The family's role is essential in protecting children from deviations, especially drugs, which threaten the stability of the family and society alike. Here is a summary of the roles the family plays in its attempt to address drugs:

#### **a) Preventive Role:**

✓ **Sound upbringing** and instilling religious values and moral principles in the child, serving as a good role model by engaging in positive behaviors in front of them, such as prayer.

✓ **Continuous supervision** without suffocating their freedom, verifying the character of their companions, and constantly following up by knowing the places they frequent or spend time with friends, and knowing all the details that happen to them.

✓ Adopting a style of dialogue and discussion with children to learn about their problems, interests, or even fears without them fearing the parents.

✓ **Educating children** about the dangers of drugs and their consequences.

✓ **Avoiding violence or reprimand** in solving problems.

✓ **Enhancing self-confidence** by assigning them certain household responsibilities, which have a great impact on strengthening personality and preventing them from seeking self-affirmation in an abnormal way.

✓ Attempting to fill the children's free time by engaging them in useful activities such as sports, reading, or different hobbies.

#### **b) Therapeutic Role:**

The family adopts this role when they discover that a son or daughter is using drugs. To prevent the problem from escalating, the family must handle the situation carefully, such as:

- ✓ **Avoiding violence** and acting calmly to contain their children.
- ✓ **Resorting to specialists** for assistance in treatment.
- ✓ **Encouraging the user**, providing psychological support, and enhancing their self-esteem.
- ✓ **Involving them in activities** that eliminate free time or even thinking about drugs.
- ✓ **Completely removing them from bad companions** and the environment where use took place.
- ✓ **Participating in awareness campaigns** about the dangers of drugs.

The roles played by families in the lives of their children are among the most important factors that contribute to raising sound individuals for society by guiding their behaviors, building their personalities, and instilling principles and values that protect children from deviance, especially facing the scourge of drugs.

#### **4. The Role of the School in Addressing the Drug Phenomenon:**

The school is considered one of the most important institutions concerned with the socialization of individuals, particularly during a certain age period, as it is the second educational institution after the family, where the student spends a large part of their daily time and life.

Sociologists, psychologists, and education specialists affirm the importance of the school as the second environment after the family, where the student spends a large portion of their time and is both influenced by and influences their surroundings within this academic and educational atmosphere. If a sound educational, instructional, and social environment is found in the school, its effect is positive; otherwise, if this sound environment is not available, the effect is negative (Aissaoui & Aissaoui, 2020, p. 232).

The school is the first formal institution to instill in the child educational moral principles through a guided curriculum. It plays a significant role in shaping the child's personality and culture, and also in protecting them from behavioral deviations, including the scourge of substance abuse, which poses a major challenge, especially with the

widespread prevalence of this blight in the school environment, among adolescents, and even among children. Thus, the school has become a core element in protecting children and confronting this phenomenon by disseminating a preventive culture aimed at instilling positive values and moral principles and enhancing health and community awareness to protect the child or adolescent from this blight. This relies on curricula that mostly carry awareness messages, where topics about the harms of drugs are integrated into lessons and activities. It also encourages interaction and communication between the student and their teacher regarding abnormal behaviors, thereby fostering a sense of belonging and collective responsibility among learners toward themselves and their community. The school is not only a place for education but also plays a preventive role within society by instilling values and correcting behaviors through lessons and through campaigns supervised by the Ministry of Education within educational institutions to raise awareness about the dangers of drugs. Furthermore, this includes organizing visiting days for doctors or specialists, accompanied by social counselors, to create a school environment that supports the student and reinforces their sense of belonging, helping them resolve their familial or personal problems. We must also not forget the school's effort to provide a recreational environment that encourages students to practice sports, in addition to providing cultural activities that promote competition, with the aim of keeping students occupied and relatively eliminating their free time.

This integration and follow-up between the family and the school contributes positively to protecting the individual from heading toward pockets of deviance and drug use. Despite the school's role in confronting this blight, due to the absence of continuous programs to address this phenomenon, the school's impact in confronting this phenomenon is not significantly felt. Moreover, the school largely relies on a theoretical aspect only, without actual application or reliance on continuous, realistic activities that genuinely address student behaviors. Furthermore, teachers do not receive specialized training in dealing with these phenomena within educational institutions, especially with the absence of social and psychological specialists, which makes it difficult to detect behaviors indicative of substance use or even address personal problems before they escalate. The activities undertaken by the institutions are not directed at all students. We must also mention the lack of coordination between the family and educational institutions, as in most cases, parents are completely unaware of what is happening with their children inside the institution, and educational institutions often fail to summon parents to inform them of

their children's behaviors. Despite the significant educational role played by the school, the weakness of preventive programs renders all its efforts in combating negative phenomena, deviance, and confronting the drug phenomenon of limited effect.

### **5. The Role of the Mosque in Addressing the Drug Phenomenon:**

The mosque is considered one of the important religious, reformatory, educational, and advocacy institutions in socialization. It plays an effective role in raising awareness about the dangers of behavioral deviations, especially in enlightening the minds of youth about the dangers of drugs, addressing social issues, and undertaking reconciliation initiatives between individuals in many cases. It also has a significant role in educating the community through sermons and social messages it conveys, not forgetting the guidance role by utilizing and managing sermons according to the community's needs. It also reinforces Islamic values and the call to abstain from prohibitions, and encourages mutual support and solidarity among community members by assisting families and cooperating with charitable associations to spread awareness. Furthermore, it contributes to propagating a preventive culture to avoid abnormal behaviors, calls for adherence to religion, adopting positive behaviors, and presenting a good image of Islam and a good role model.

Despite all the roles played by the mosque and places of worship, its role remains confined to those who attend the sermons, which limits its influence to a specific segment of the population. Therefore, the scope of discourse must be expanded to reach larger segments, and communication and media tools must be utilized to achieve a greater impact in society to combat deviance and confront the drug blight among community members and youth, as they constitute the largest group that uses social media and communication technologies.

### **6. The Role of the Media in Addressing the Drug Phenomenon:**

Media and communication tools, in their various forms, play a fundamental role in shaping individuals' awareness and influencing their orientations. With social change and technological development, media and communication tools have become a bridge for communication between individuals. Alongside this change, social blights and problems have emerged, and the media has a role in confronting them due to its ability to influence

public opinion across all its spectrum, whether traditional (television, radio, or print newspapers) or modern (electronic media and social networking sites).

The awareness role played by these tools is considered essential because they cover a large segment of society, especially youth or those vulnerable to deviance and use. The messages sent by these tools are specifically directed at youth and the community at large, contributing to shaping a collective awareness by publishing facts, images, videos, and articles about the dangers of drug use and warning against them with realistic depictions, thereby creating a rejection of this blight within society. However, the contradiction of sometimes promoting this blight and sometimes warning against it, coupled with the lack of continuity in preventive campaigns, does not create a lasting impact on community awareness. Given the absence of coordination between this institution and the other institutions, especially the family, school, and mosque, the significant influence of this institution must be invested in raising community awareness about the dangers of this blight.

Combating this phenomenon is an integrated responsibility shared by all socialization institutions in society, primarily the family, which is the first nucleus for establishing positive behavior within the community, with the remaining socialization institutions completing this mission. Drugs are not an isolated problem; rather, they are a health, social, security, ethical, and religious problem that requires the solidarity of the entire community, with all its institutions and segments.

## **Lecture 09: Algerian Legislative Efforts in the Field of Drug Control**

The drug problem, like other social issues, has increasingly threatened the stability of societies. Algeria, like other nations, faces serious challenges, especially in recent years, due to the widespread nature of this phenomenon across all segments of society, particularly among youth. It has become a threat to social security and public health in all countries of the world, prompting the international community to adopt measures and penal legislations against anyone who consumes, traffics in, cultivates, or transforms raw materials into manufactured substances, with the aim of confronting this scourge.

Algeria, too, suffers from the drug problem, which has become one of the issues disturbing state security, leading it to sound the alarm by activating all security plans, laws, and legislations in an attempt to curb it. This has necessitated the coordination of all efforts in every field—from deterrent laws to activating the role of society itself, including all its institutions, from civil society to mosques, schools, and universities, each according to its position.

## **Drugs in Algeria:**

The historical development of drug use allows us to understand that this phenomenon has not been confined to one region or one civilization over another, nor has it been unknown. The well-known uses and the public's ignorance of the consequences of use facilitated its deep penetration into societies. Despite this, it was not initially considered an abnormal or pathological phenomenon within communities; its uses were mainly medical for temporary pain relief or healing. However, the social changes that have occurred have contributed to its alarming spread, and the methods of its manufacturing and chemical alterations have removed it from the realm of natural drugs, often used in medicine, to hallucinogens that are no longer confined to a specific group but have spread to include all segments of society—children, youth, adults, and the elderly, across both genders.

Since Algeria is no exception, it too has witnessed a significant increase in the rates of consumption and trafficking of these substances in recent years, with a dangerous rise in indicators among users, particularly in the age group of 15–40 years, extending even to students and children. This has caused the state to sound the alarm and to review all data that could reduce and confront this phenomenon, starting with understanding the causes and finding solutions. Algeria has enacted a set of strict laws enabling it to combat this phenomenon. The most consumed substances in Algeria are cannabis (kif), psychotropic substances, and hallucinogenic medicines like Pregabalin, Ecstasy, and Lyrica, known as "the rocket," which are reported daily in the news. Other manufactured substances like Chouchana (a local term for a drug mixture) and inhalant narcotics like glue, gasoline, or paint materials are prevalent among low-income groups, especially children. This is indicated by the reports of the National Office for the Fight against Drugs and Drug Addiction (ONLCDT). This spread is attributed to a combination of social factors such as family disintegration or the absence of dialogue within families, along with social problems like unemployment and poverty, and all the psychological problems resulting there from. Economic problems also play an important role in the tendency towards deviance, crime, and use in most cases.

For this reason, Algeria has striven to adopt a preventive policy pursuant to the provisions of the new law, especially Article 5 bis 8, which clearly shows the preventive

dimension in Law 23/05, focusing mainly on the National Office for the Fight against Drugs and Drug Addiction (Ammara & Rahaili, 2025, p. 282). Prior to this, Algeria concluded many international agreements for cooperation in combating illicit trafficking networks for drugs and psychotropic substances, such as the UN Conventions of 1961, 1971, and 1988.

In general, the preventive measures that have been effectively implemented in drug control within contemporary international drug control conventions are:

- ✓ The Single Convention on Narcotic Drugs of 1961, as amended by the 1972 Protocol.<sup>1</sup>
- ✓ The Convention on Psychotropic Substances of 1971.<sup>2</sup>
- ✓ The United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988.

As for the Algerian State, it established the National Office for the Fight against Drugs and Drug Addiction, which clearly demonstrates the political will of the Algerian government to harness all means possible to limit and eliminate this scourge.

This Office is a public institution of an administrative nature specializing in handling and following up on drug cases. It was established pursuant to Executive Decree No. 212-97 of June 9, 1997, as amended and supplemented, and was formally installed on October 2, 2002. It was transferred to the supervision of the Ministry of Justice after having been under the supervision of the Head of Government. Its main functions include:

- ✓ **Collecting information** that facilitates the search for and suppression of drug traffickers.
- ✓ **Ensuring coordination** between operations carried out in the fields of prevention, treatment, and reintegration.
- ✓ **Analyzing indicators and trends** and evaluating results to allow public authorities to take appropriate decisions.
- ✓ **Preparing a guiding plan** in the field of drug control and addiction, subject to approval.
- ✓ **Implementing measures** aimed at promoting prevention operations and improving the level of medical and social care.

✓ **Strengthening inter-sectoral coordination** and developing means of drug control among different departments (Souih).

To ensure optimal coordination, the Office is equipped with a coordination mechanism called the Evaluation and Follow-up Committee.

Regarding the penal texts enacted by the Algerian State in an attempt to confront this phenomenon, which fall under the state's criminal policy, a set of punitive and preventive laws have been legislated. Concerning the penalty for possession of narcotics for use and consumption, Article 12 of Law 04/18 (relating to the prevention and suppression of the use and illicit trafficking of narcotic drugs and psychotropic substances) stipulates: "Any person who illicitly possesses or consumes narcotic drugs or psychotropic substances shall be punished by imprisonment from two months to two years and a fine from 5,000 DZD to 50,000 DZD, or by one of these two penalties" (Official Gazette No. 83, 2004).

Article 15 of the same law stipulates: "Any person who:

1. Facilitates the illicit use by others, whether for payment or free of charge, by providing a place for this purpose or by any other means, and the same applies to owners, managers, or any capacity, whether of a restaurant, club, or any place.

2. Places narcotics or psychotropic substances in foodstuffs or beverages without the consumers' knowledge, thereby exposing them to danger."

Such a person shall be punished by imprisonment from 5 to 15 years and a fine from 500,000 DZD to 1,000,000 DZD.

Pursuant to Article 245 of Health Law No. 05/85, "Any person who illicitly uses one of the materials or plants classified as narcotics shall be punished by imprisonment from two months to one year and a fine ranging between 500 DZD and 5,000 DZD, or by one of these two penalties." The legislator made an exception for anyone who uses these substances legitimately, whether in medicine, treatment, or surgical operations for anesthesia (Ammara, Ibid, p. 286).

Executive Decree No. 07-228 of July 30, 2007, specifies the organization and functioning of the National Committee for the Prevention and Fight against Drugs and

defines its tasks in coordinating between the Ministries of Justice, Health, Youth, and Interior (Ministry of Justice).

Law No. 18-13 of July 2, 2018, relates to prevention measures against risks associated with psychotropic substances and pharmaceutical products, and aims to regulate the dispensing of psychotropic prescriptions and target doctors who tamper with prescriptions.

Regarding promotion and trafficking, the legislator dedicated Article 17 of Law 18/04 to the penalty of life imprisonment for any person who illicitly imports or exports narcotics or psychotropic substances. The legislator treated this as a felony, imposing the maximum penalties.

Article 16 bis 1 stipulates that "Any person who intentionally promotes narcotics and psychotropic substances by any means shall be punished by imprisonment from 5 to 10 years and a fine from 500,000 DZD to 1,000,000 DZD." If this act is committed by exploiting a minor or a person with special needs, the penalty shall be imprisonment from 10 to 20 years and a fine from 1,000,000 DZD to 2,000,000 DZD.

Article 19 of Law 18/04 imposes imprisonment from 10 to 20 years and a fine reaching 50,000,000 DZD on anyone who produces, cultivates, possesses, sells, stores, prepares, delivers, or transports narcotic drugs or psychotropic substances.

The legislator did not limit itself to imposing penalties but also utilized many state agencies and institutions such as the Gendarmerie, Police, and Customs to confront this blight.

Drug crime is among the offenses the state seeks to confront by all means and methods, having deployed a stockpile of deterrent and preventive laws and internal security agencies and institutions. However, this will not be effective unless efforts are integrated across all sectors—starting from the family, school, civil society, the mosque for awareness, and social media and mass media. All this will enable the state to eliminate this phenomenon that threatens the security and stability of the nation.

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