



Perception of substance abuse: prevalence, causes & socio-economic status.

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Abstract

Substance abuse is a serious problem adversely affecting the social fabric of the country. Psychoactive drugs when taken by a person can modify perception, mood, cognition, behaviour, or motor functions. Addiction to drug not only affects the individual's health but also disrupt their families and whole society. The present study is descriptive in nature. 100 drug abusers from three different rehabilitation centers based in Guwahati city were interviewed. Purposive sampling technique was used to collect the data. The present study infers that the substance abused youth were more in urban areas than rural areas and most of them were living with their family. Alcohol and heroin were found to be main substance abused by the youths. Curiosity, for fun and peer pressure were the predominant reason for using psychoactive drugs. Majority of drug abused youths were in the age group of 18 to 21 years and they mostly unemployed. The majority of the substance abused youths were living with family.

Keywords: Substance abuse, psychoactive drugs, Socio-economic status.

1. Introduction

Substances are compounds that because of their chemical structure, change the functioning of biological systems (Racheal Mukoya *at el.*, 2013). Consciousness alerting drugs are drugs that produce changes in consciousness (Wallace *at el.*, 1987). Psychoactive drugs use continues to be major risk behaviour among youths, accompanied with physical and/or mental health complications/consequences. Substance abuse and dependence is one of the most frequently occurring disorders in adolescents, young adults, and the general population. In fact, substance use disorders are the most prevalent form of psychiatric disorder in the United States (Rivers *at el.*, 1997). Although all age groups are affected by using psychoactive substances, adolescents and young adults are particularly affected. A substantial proportion of the adolescent populations use drugs or alcohol to the extent that their health, interpersonal relationships, or school performance is adversely affected (Johnston *at el.*, 2003). The drugs mostly used by adolescents are cigarettes, alcohol,

marijuana, glue, paint, paint thinners, aerosols and polish remover among others (Sweetney and Neff, 2001) in the study on teen drug abuse, Dakota *at el.*, (2003), found that 25% of Americans die as a result of substance abuse.

The term Drug abuse, applies only to instances in which people take drugs purely to change their moods, and in which they experience impaired behavior or social functioning as a result of doing so. Unfortunately, when people consume consciousness alerting drugs on a regular basis, they often develop two kind of dependence :

Physiological dependence: Physiological dependence occurs when the need for the drug is based on organic factors, such as changes in metabolism. The physiological dependence is commonly termed as drug addiction.

Psychological Dependence: It is a state characterized by emotional and mental preoccupation with the drug and its effects. That is, the drug user constantly thinks only about the drug and he has a

continuous, uncontrollable craving for it. on one's total personality structure and the gravity of
 Some commonly used substances and their effects the drug syndrome are summarized in Table 1.

Table 1: Various Commonly Used Substances and Their Adverse Health Effects.

Substance (Drugs)	Method of intake	Intoxication effects	Adverse health consequences
Alcohol	Drink	Relief from anxiety and tension, drowsiness, lured speech, poor co-ordination and judgment	Depression, sleep problems, poor memory and judgment, impaired sexual function, liver problems
Marijuana (cannabis)	Smoked, swallowed	Euphoria, slowed thinking and reaction time, confusion, impaired balance and co-ordination	Cough, frequent respiratory infection; impaired memory and learning; increased heart rate, anxiety; panic attack.
Cocaine (Stimulant)	Snorted, smoked, injected	Increased heart rate, blood pressure, temperature, metabolism, feeling of exhilaration, energy, increased mental alertness.	Rapid or irregular heart beat; reduce appetite, health loss, heart failure, nervousness, insomnia, chest pain, respiratory failure, nausea, abdominal pain, strokes, seizures, headaches, malnutrition and panic attack.
Amphetamine (stimulant)	Swallowed, smoked, injected, snorted	Increased heart rate, blood pressure, metabolism, feeling of exhilaration, energy, increased mental alertness, rapid breathing	Rapid or irregular heart beat; reduce appetite, health loss, heart failure, nervousness, insomnia, tremors loss of co-ordination; irritability, anxiousness, restlessness, paranoia, impulsive behavior, aggressiveness, psychosis
Heroin (Narcotic)	Injected, snorted, smokes	Pain relief, euphoria, drowsiness, unsteady gait	Nausea, constipation, confusion, respiratory depression and arrest, unconsciousness, coma and death
Tabaco	Smoked, Swallowed	Relief from anxiety and tension, drowsiness	Brain damage, impaired reasoning and will power
Barbiturates (depressant)	Swallowed, injected	Reduce anxiety, feeling of well-being; lowered inhibition; slowed pulse and breathing; lower blood pressure; poor concentration; drowsiness	Fatigue, confusion; impaired co-ordination memory, judgment; depression, unusual excitement, fever, slurred speech, dizziness, life threatening withdrawal.
LSD (hallucinogens)	Swallowed, absorbed through mouth tissues	Altered state of perception and feeling; nausea; increased body temperature; loss of appetite, sleeplessness, weakness, tremors, persistent mental disorders	Persisting perception disorders.

2. Methodology

The present study is carried out with the principal objectives such as -

- (i) To find out the major prevalence psychoactive Substances abused by the youth
- (ii) To study the major causes responsible for the Substance abuse.
- (iii) To study the socio-demographic & economic status of the substance abused youth

(a) Area of study

For being the principal city of Northeastern states Guwahati was chosen as the study area for the present work. The present study is carried out for the three reputed rehabilitation center Kripa Foundation, Navajiban & Asha Bhwan respectively.

(b) Research methodology

The present study was conducted on 100 males between the age group of age groups of 18-30 years. Purposive sampling was used for selecting the sample. A self-structured questionnaire was administered to collect the data.

3. Results & discussions

3.1 Type of substances abused by the youth

In the present study the psychoactive substance used by the youths are shown in Table 2. It has been observed that predominant substance is alcohol among the various drugs (Fig1). It has been reported during survey that most of the youths takes alcohol (51%) followed by Heroin (19%) and Polydrug (15%). Similar result reported by Budhathokiet. al. and Best *et al.*,

Table 2 : Type of substance abused by the youth

S/N	Drug	No of respondent (N=100)	% of Respondent
1	Alcohol	51	51
2	Heroin	19	19
3	Marijuana	5	5
4	Ganja	4	4
5	Inhalant	3	3
6	Polydrug	15	15
7	Cocaine	4	4

3.2 Major causes responsible for substance abuse

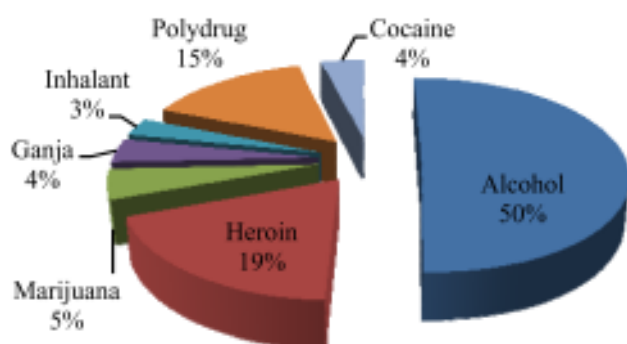
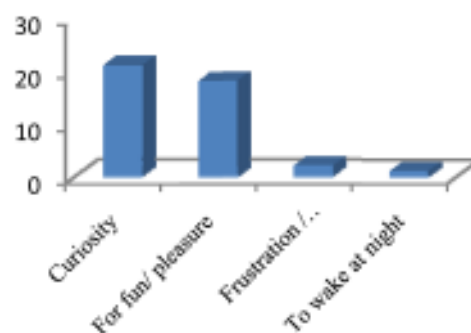
In the present study during one to one interaction with Substance abused youth (Table 3), the most reported causes for abusing are predominantly psychological & Socio-Cultural Causes. It includes for Fun (18%), Curiosity about substances (21%) and peer pressure (24%). The present study endorsed the findings of Dube et al (1978), Hennigfield (1991), and Budhathoki et al (2010) that influence of peers acted as major instigator factor.

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Table 3: Major causes responsible for substance abuse

S/N	Different Causes	No of Respondent (100)	% of Respondent
Psychological causes			
1	Curiosity	21	21
2	For fun/ pleasure	18	18
3	Frustration / Anxiety	2	2
4	To wake at night	1	1
Social & cultural causes			
5	As a Fashion	1	1
6	Peer pressure	24	24
7	Lack of parental care and affection	2	2
8	Broken homes	4	4
9	Imitation	1	1
10	Influence of media	5	5
11	Religious Reasons	3	3
Economic causes			
12	Unemployment	6	6
13	Easy availability of money	2	2
Miscellaneous			
14	Easy availability of drugs	7	7
15	Poor Health	3	3

**Fig1 :** Prevalence of various substance abuse**Fig 2 :** Various psychological causes

3.3 Socio-demographic Profile of drug abused Youth

Age & Education : The Table 4 Shows that the majority of Substance abused youths are in the age group of (18-21) and it appears 48 % and 18 % in the age group of 22 – 24 and 34 % in the age group of 25

– 30. Similar kind of results has been reported by Zulfikar Ali et al (1994) and Aijaz Ahmad et al in Kashmir (2006). It has been observed that 40% of respondent were having educational qualification in between XI-XII(Fig3). The drug abuse rate increases from middle school standard to Higher Secondary

standard and then decreases as person attains higher educational status. The prevalence of drug abuse was higher among youths living in urban areas than rural areas.. The present study coincides with the study of R. Ghulam et al at Madhya Pradesh (1996).

Religion & Caste : Table 4 revealed that Hindu respondents were predominantly high (76%) in

comparison to Islam (19%), Christian (5%). Similar result reported by Anees Ahmad et al at Aligarh, U.P (2009). The graphical representation is shown in fig.4. It has been observed that Majority of respondents were General category (65%) followed by SC (11%), OBC (9%), 7% ST (P) and 8% ST (H) of total respondent.

Table 4 : Socio-demographic profile of substance abused youth

S/N	Socio-Demographic Components	No. of Respondents	% of Respondents
1	Age Group (Years)		
	18-21	48	48
	22-24	18	18
	25-30	34	34
2	Education		
	I-V	3	3
	VI-X	30	30
	XI-XII	40	40
	Graduate	20	20
	Post Graduate	3	3
	Diploma	4	4
3	Various Caste		
	General	65	65
	OBC	9	9
	SC	11	11
	ST(P)	7	7
	ST(H)	8	8
4	Religion		
	Hindu	76	76
	Islam	19	19
	Christian	5	5

3.4 Socio-Economic Status of Drug Abused Youth

Residential status & living pattern : The Table 5 revealed that 90% of respondent were living in urban area whereas only 10% of the respondent were living in rural area. In this present study it has been observed that majority of respondent (Table 5) were living with their own family (89%) while only 11 % living alone.

Family history & marital status : Majority of respondent (48%) reported that their father used drugs while very negligible respondent reported that their mother used drugs (2%). Again 10 % respondent reported that their brother using drugs while 9 % respondent reported that their brother and father both were using drugs. 7 % of total respondents reported

that their other family members used drugs. 24% respondents reported that none of their family members used drugs (Table 5).

The result of marital status (Table5) clearly shows that maximum unmarried persons (80%) reported the use of substances. Again 19% married youth used drugs while the divorce is only 1%. (Fig.4).

Various occupation & family income : The Table 5 shows that Unemployed youth have more inclination towards the use of drugs and it appears 27%. It has been observed that 24% of the respondents were in private sectors, 23% were businessman and 11% were self-employed (Fig.6). In comparison to other occupation Govt service working youth has a fewer tendency for drug using. Again it has been reported that 6% of the respondents were students.

From the Table 5 It has been observed that Majority of addicts (72%) had total family monthly income from < Rs.10000/- and Rs.10000 – <Rs.20000/- while 20% had medium income ranging from Rs.

20000/- - <Rs.30000/- only 8% youth had reported high income group i.e above Rs.30000/- of total family income. Thus majority of respondents were of lower Income group.

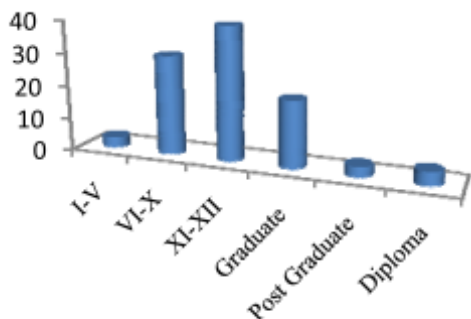


Fig3: Educational profile of abused youth

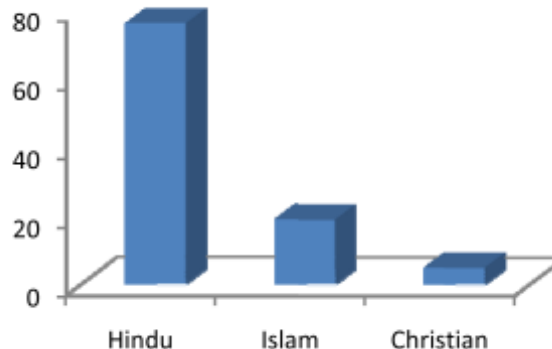


Fig 4: Various religions of abused youth

Table 5 : Socio-economic status of substance abused youth

S/N	Socio-economic Status	No. of Respondents (100)	% of Respondents
1	Living With		
	Family	89	89
	Alone	11	11
2	Residential status		
	Urban	90	90
	rural	10	10
3	Family History		
	Father	48	48
	Mother	2	2
	Brother	10	10
	Other	7	7
	Father & Brother	9	9
4	Marital status		
	Unmarried	80	80
	Married	19	19
	Divorce	1	1
5	Various occupation		
	Govt service	9	9
	Private service	24	24
	Business	23	23
	Self employed	11	11
	Unemployed students	27	27
6	Family Income		
	Low	72	72
	Medium	20	20
	High	8	8

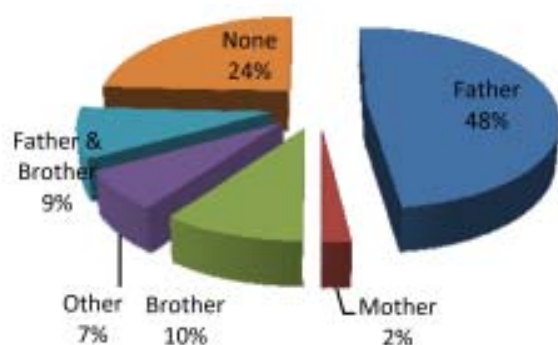


Fig 5: Family profile of abused youth

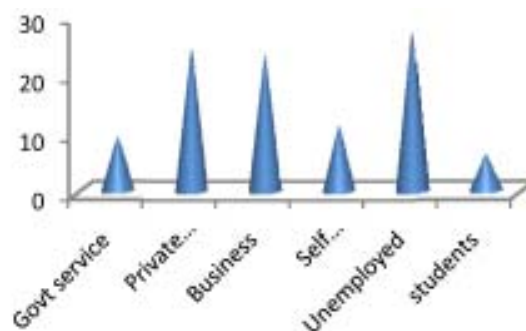


Fig 6: Occupational profile of abused youth

4. Conclusion

From the study it has been observed that the problem of substance abuse is multi-dimensional. The study reveals that the various causes of drug abuse among the youths are peer pressure, fun and amusement and curiosity.

Drug use and abuse wear out individuals, families and communities. Prevention is the most important

component of the “war on drugs” which is fulfilled by qualitative scientific research. Government and policy makers should initiate the appropriate preventive measure against the drug abuse. It should be remembered that preventive is cheaper than cure a diseases. It is worth mentioning that family and community participation is must to control this problem of drug abuse.

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