Abstract

Drug abuse is one of the top problems confronting the nation today especially among the adolescence. Incidences of drug and alcohol abuse and related anti-social behaviour have tremendously increased in recent years in India. This has become a matter of concern to the government, parents, teachers, Non-governmental organizations and all other relevant agencies. The India government has recognized the seriousness of the drug problem and initiated the (NDPS) Narcotic Drugs and Psychotropic Substances Act, 1985. The official record states that the NDPS Act was enacted in order to provide adequate penalties for drug trafficking, strengthen enforcement powers, implement international conventions to which India was a party, and enforce controls over psychotropic substances. The Act was amended in 1989, 2001 and more recently in 2014. The study found that drug use and abuse among youth is increasing despite the control mechanisms that have been put in place. The paper recommended that as a first step to prevent and control drug abuse, parents should be sensitized on the dangers of drug abuse, the attendant problems and their functions as role models; schools should have a drug prevention curriculum from Kindergarten onwards teaching that drug use is wrong and harmful and that there is need for initiation of rehabilitation programs for drug dependent persons.

I. INTRODUCTION

June 26 is celebrated as International Day against Drug and illicit Trafficking every year. Adolescence is a crucial period for the beginning and experimentation with new things. The situation of drug abuse in adolescence is becoming a global health problem and is reaching at alarming position in India. Therefore, the researches substance abuse have also been receiving attention in developing countries like India because of changing trends in the
prevalence of substance use and the rising magnitude of the problem. When the adolescents first experiment with drugs, people perceive that it has much adverse effects over their life and if continuous it may become necessity for user to feel normal. They may continue to take drugs even though it may cause tremendous problems for themselves. The drug abuse is an illness which can be characterized as destructive use of substance that causes many serious health related & social behavior problems. Psychological behavior changes associated with substance abuse may be mood disorder such as depression, anxiety, thought disorders such schizophrenia as well as personality disorder like antisocial personality traits. In adolescence it is a major problem defining the future of the youth in both developed in developing countries. Many studies have been conducted on adolescence drug abuse since long but very few studies are found in India and need to be focused. It was seen by many researchers & clinicians that substance use disorder during adolescence age share many similarities as well as differences when compared to other psychological disorders. There are many researches related to use & risk factors associated with drug abuse among adolescents but there are still many contradictions found in these researches. Even though a very few studies are available on this topic in India, but a review of available can define the causative factors and assess in planning other related studies as well as strategies. In this paper, the extent, pattern and trends of drug abuse among adolescents in India have been review.

II. DEFINITION OF DRUG ABUSE AND RELATED CONCEPT

Drug Abuse: It is the chronic use of a drug for a reason other than for which it was intended. It is the bad use of a drug for example alcohol, tobacco, cannabis, heroin and cocaine.

Drug misuse: This using a drug for a reason other than its clinical purpose. When a person starts taking drugs regularly, the drugs produce tolerance, addiction, withdrawals and psychological dependence.

Causes of Drug Abuse: Drug abuse has no single cause. It is important to examine and consider the different theories about possible causes of the problems. Peer influence is one of the causes of drug abuse among the youth in India. Many youngsters are pulled into drugs by those they associate with. It is learned from those already involved in the practice. Bandura and Walter developed a “social learning theory” of personality which supports this fact. To them, this theory is based on the premise that behavior is learned and personality can be explained in terms of cumulative effects of a series of learning experiences. The same observation was made by Edwin H. Sutherland and Donald R. Cressey in their “Differential Association Theory”. They formulated the theory in such a way as to show how and otherwise obedient person through stages of successive events begins to engage in deviant or anti-social behavior. The theory shows how deviant behavior is learnt without so much biological and psychological defects. Impersonal agencies of communication such as movies, television, radios and newspapers play an important role in the genesis of antisocial behavior. Drug abuse as a form of anti-social behavior can be learned through these media.
There is however no scientific fact to show the extent to which these agencies have influenced the youth into drug used in India. Some of those thought to have been influenced by this media into the habits actually copy them from their peers and parents. Most of the youth involved in drug abuse do not have access to these media. According to the social control theory, the weakening of the social controls allows the youth to be involved in drugs. With rapid industrialization, urbanization and increased movements to urban areas, new ways of life have been ushered in and new values have replaced the old ones, therefore, creating conditions under which behavior can be variously defined. Age-old taboos and traditional social control mechanism have ceased to have force, opening the door to permissiveness that has led the youth to indulge in antisocial behavior including drug abuse. Parents are no longer in the firm position to direct and guide their children. Some of the youth live far away from their parents, either in school or other learning institutions or may be working. Lack of parental care due to the working situations of the mother or both parents and the disintegration of joint family system have tended to encourage the vice. The child relationship with the parents especially the mother is very important in the child development as it shapes the child behavior. The children according to the socialization theory need both parents to grow up as a normal law abiding youth. Broken homes in India have caused or increased the percentage of the youngsters involve in drug abuse. But more distractive than the broken homes in a child’s growth where parent live together in atmosphere of tension and unhappiness. Frustrations and emotional stress due to failures, sorrows of miseries of life lead people to drug abuse. Robert Merton’s theory of the anti-social behavior emphasizes that an individual finds no avenue towards achievement of his goals he may be compelled to indulge in the anti-social behavior and one way of doing that is by retreating from social participation through drug addiction. The frustrations experience may result from conditions at school, home or place of work. Some observers believe that some parents are responsible for their children’s drug abuse by exerting enormous pressure in dictating the career goals of their children even if they are not naturally gifted in the specified areas. Some young people on the other hand, try to match the achievements of family members that may be beyond their ability. When they fail they resort to drugs. Merton talks of differential opportunity causing frustration that drive people into antisocial behavior. He says that modern societies put a very high premium on material success, the form of wealth by which education opens the doors to this success and status symbols but at the same time the same societies fail to make adequate institutional means for the average person especially the poor in slums to achieve the goals. Poverty also tends to be a characteristic of social deviants including drug abusers. This is what comes to be called economic explanation of deviant’s behavior. Poor economic conditions are worsened when the youth do not see any hope of employment even with education. A sociologist defines this feeling when he states; “Now with formal education everywhere and for nearly everyone, the relationship between schooling and future work is at best not very direct and at worst completely incomprehensible. Some youngsters do not find any meaningful link”. The youth therefore do not find a positive outlet for the energies. It has been suggested that
boredom or even fear of it, motivates youngsters to engage in anti-social behavior. Drug abuse may therefore be a satisfying form of recreation and it is difficult for the community to substitute an equally thrilling but more conventional form of diversion. Abandonment and homelessness is another reason for drug abuse among the youth in India. Many mothers abandon their children in infancy who therefore grow up in the street and take the drugs to waste away their time. Some of them are poorly fed and desperate. They are brought up in a culture of drug taking. Anxieties of adolescence have also led youngsters to anti-social behavior including drug abuse in a way of trying to discover. An English Psycho-analyst Dr. Derek Miller has said “Adolescence is a period of in adaptation. All adolescents are disturbed”. Sociologists and anthropologists as well as other people have clearly defined the difficulty that adolescents find in a changing society. In many societies it is accepted and understood that adolescence is the period when a youngster forms his own identity usually by meaningful conflict with his parents or the older generation. It has been said that adolescence is a period of health hostility on the part of the youngsters who confronting the adult standards and traditions is discovering himself. Dr. Miller says that during this time the youngsters is hostile and deviant behavior may provide a solution for him. Some youth in India take drugs because of the “Pleasure principle”. These young people do not suffer from stress or money is not their problem. They came from well-to-do families, with video and television sets, computer games and cars at their disposal. Materially they lack nothing. However, they take drugs for pleasure of it and more fun. This is according to Dr. Njagi of Drug Abuse Rehabilitation and treatment care, Nairobi. He argues that when drugs are taken over long periods for fun and pleasure, addictions sets in. Another cause of drug abuse according to Dr. Njagi is “inadequate personality”. Those in this category cannot cope with problems as they came and so they resort to drugs to forget their problems. But the problem never really go away and soon such people became hooked to drugs. Some people take drugs because they are depressed while other are depressed because they are taking drugs. Slum areas in cities and towns can also be said to contribute to increase drug abuse. Slums are said to breed the youngest percentage of drug abusers through the removal of slums in some countries did not lead to reduction in incidences of anti-social behavior. This is explained by ecological theory applied by Burgees and Park in 1920 to the study of human phenomena in Chicago City and related deviant behavior to the growth of the city. Deviants were found to come from highly and densely populated areas and especially, from congested estates of the city. This explanation applies to the situation in some of the Indian towns and cities particularly Mumbai where slums like Dharavi, Asia’s largest slum, Bhalswa slum Delhi, Basanti slum Kolkata are known to accommodate large number of alcoholics and drug addicts. Drug abuse also is caused by some psychiatric or mental disorders. People may be driven into heavy drinking by alcoholic or intoxication psychoses leading them to committing other offences like the violation of traffic law, homicides and crimes of violence. Manic depression psychosis especially at the manic phase drives individuals to drug addiction and peddling. Suggestions have also been made about inherited alcoholism though this is still a matter of debate and its existence is still doubt. It is true that the
incidence of intellectual and personality disorders is higher among descendants of alcoholics than the general population as a whole but genealogical studies comparing the descendants of an comparing the descendants of an alcoholic with the descendants of his non-alcoholic siblings reveal an almost equal proportion of psychopathological cases in the two groups. These studies seem to point to the conclusion that what was originally considered to be specifically alcoholic heredity is in fact but a psychopathic heredity where alcoholism is a complicating factor or a secondary acquired symptom. Today, therefore caution must be exercised in the use of the term inherited alcoholism, while still waiting the results of further research which will perhaps solve this problem. In England, Cyril Burt in his book “the young delinquent” talked about the criminality of the children of alcoholic parents. He found many cases of delinquent children among alcoholic parents than among non-alcoholic parents.

III. SPECIFIC DRUGS AND THEIR EFFECTS

- **Alcohol**: Alcohol is contained in drinks such as beer, wine, brandy, spirits and whisky. It is an extremely potent drug. It acts on their body primarily as a depressant and lowers down the brain activity. However, in low doses it can be a stimulant. If used in excess, it will damage or even kill body tissues including muscles and brain cells. Its consumption causes a number of marked changes in behavior. Even low doses impair judgment and coordination. With extreme intoxication the drinker may lapse into comma. Alcohol has produced many enjoyable moments and sad ones as well. If combined with other depressants of the central nervous system, much lower doses of alcohol will produce the effect just described. Repeated use can lead to dependency. Sudden withdrawal of alcohol intake is likely to produce withdrawal symptoms including severe anxiety, tremors, hallucinations and convulsions. Alcohol withdrawal can be life threatening. Long term consumptions particularly when combined with poor nutrition can led to permanent damage to vital organs such as the brain and the liver. Mothers who drink alcohol during pregnancy may give birth to infants with fatal alcohol syndrome. These infants have irreversible physical abnormalities and mental retardation. In addition research indicates that children of alcoholic parents are at greater risk of becoming.

- **Tobacco**: Tobacco comes in form of cigarettes, cigars, sniff and in smokeless tobacco. Cigarettes are considered a gateway drugs-a drug first experimented with before trying other drugs with greater psychoactive effects. Smokers are more likely than non-smokers to contract heart disease. Lungs, larynx, esophagus, bladder, pancreatic and kidney cancer also strike smokers. Smoking during pregnancy poses serious risk. Spontaneous abortion, preterm birth, low birth weight and fatal and infant deaths are all more likely to occur when the pregnant woman is a smoker. The most dangerous substance in tobacco is nicotine. Although it is implicated in the onsets of heart attacks and cancer, it’s dangerous roles is reinforcing and strengthening the desire to smoke. Because nicotine is highly addictive, addicts find it very difficult to stop smoking. The likelihood of contracting lung cancer is greatly reduced by quitting smoking.
• **Cannabis** It is commonly known as bhang. Also known as marijuana and hashish (cannabis resin). Cannabis is a bisexual stalky plant with green leaves and grows wild in many parts of the country. The cultivation of the herbal cannabis commonly known as bhang is spread throughout the country especially Uttarakhand state. Cannabis is grown in forests, hilly terrain, and river banks or concealed among other crops far away from homes. Chemical spraying is to be recommended for eradication. All forms of cannabis have negative, physical and mental effects. Substantial increase in heartbeat, blood shot eyes, a dry mouth and throat and increased appetite are characteristics of its use. Use of cannabis may impair or reduce short term memories and comprehension, alter sense of time and reduce ability to perform tasks requiring concentration and coordination for example driving. Research shows that those use them like students do not retain knowledge when under influence. Motivation and cognition may be altered making the acquisition of new information difficult. Marijuana can also produce paranoia and psychosis. Because users often inhale the unfiltered smoke deeply and then hold it in the lungs for as long as possible, marijuana is damaging to the lungs and pulmonary system. Marijuana smoke contains more cancer agents than tobacco smoke. Long term users of cannabis may develop psychological dependents and require more of the drug to get the same effect. The drug can become the centre of their lives. Chronic use leads to damaged lungs, chest pains, bronchitis, emphysema, hallucinations/fantasies, abnormal sperm forms in the male and decreased ovulation or increased menstrual irregularities in female.

• **Heroin**: This is a narcotic drug that lowers perception of pain. It is fine brown/white powder chemically extracted from opium poppy. The use of this drug leads to Euphoria, reduced appetite, chronic bronchitis, tetanus, hepatitis and endocarditic. Overdose leads to reduce oxygen to the brain, suppressed respiration, coma or even death. It is medically used as anesthetic and cough suppressant.

• **Cocaine**: It is a crystalline-whitish powder chemically produced by cocoa leaves. This drug is sourced from South Africa of Brazil and Colombia but its availability and abuse in India is minimal. The leaves traditionally were chewed to suppress hunger. It is applied to the gum of the mouth, tongue, eyelids or private parts to delay orgasm. It is also injected and favorably snorted. Its use causes sleeplessness, excitement, loss of appetite, increased sexual desire and feeling of self satisfaction. Prolonged use leads to loss of weight, impotence, blindness, orgasm failure, stomach problems, liver and lung damage. Overdose leads to death due to respiratory paralysis or cardiac arrest.

### IV. DRUG USE IN INDIA

India too is caught in this vicious circle of drug abuse, and the numbers of drug addicts are increasingly day by day. According to a UN report, one million heroin addicts are registered in India, and unofficially there are as many as five million. Cannbis, heroin, and Indian produced pharmaceutical drugs are the most frequently abused drugs in India. Cannabis products, often called charas, bhang, or ganja, are abused throughout the country because it
has attained some amount of religious sanctity because of its association with some Hindu deities. The International Narcotics Control Board in its 2002 report released in Vienna pointed out that in India persons addicted to opiates are shifting their drug of choice from opium to heroin. It is estimated that in India, by the time most boys reach the ninth grade, about 50 percent of them have tried at least one of the gateway drugs. However, there is a wide regional variation across state in terms of the incidence of the substance abuse. For example, a large proportion of teens in West Bengal and Andhra Pradesh use gateway drugs (about 60 percent in both the states) than Uttar Pradesh and Haryana (around 35 percent).

Table 1: Drug and Alcohol use in college-age Adolescence in-2015

<table>
<thead>
<tr>
<th>Year</th>
<th>Percentage</th>
</tr>
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<tbody>
<tr>
<td>2015</td>
<td>4.6%</td>
</tr>
<tr>
<td>2005</td>
<td>4.0%</td>
</tr>
<tr>
<td>1995</td>
<td>3.7%</td>
</tr>
</tbody>
</table>

Table 2: Heavy Alcohol Use Higher in college than Non College peers.

<table>
<thead>
<tr>
<th></th>
<th>Binge Drinking</th>
<th>INTOXICATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Past 2 Weeks</td>
<td>College Peers</td>
<td>31.9%</td>
</tr>
<tr>
<td>Past 2 Weeks</td>
<td>Non-College Peers</td>
<td>23.7%</td>
</tr>
<tr>
<td>Past Month</td>
<td>College Peers</td>
<td>38.4%</td>
</tr>
<tr>
<td>Past Month</td>
<td>Non-College Peers</td>
<td>24.9%</td>
</tr>
</tbody>
</table>

V. CONSEQUENCES OF DRUG ABUSE BY THE ADOLESCENCE

The abuse of alcohol and other drugs lead to acute effects on the body. It alters judgment, vision, coordination and speech and also leads to risk taking behavior. Drug use increases the likelihood of being involved in traffic accidents which may lead to death or injury. In the USA alcohol related highway accidents are the principle cause of death among young people aged 15-24 (teenage drivers). About half of all youth death in drowning, fires and suicide and homicides are alcoholic related. The youth involved in drug related problems affecting their relation with family members and friends. They are likely to be involved in fights and these get them into trouble with the law. Because drugs lead to irresponsible sexual behavior, girls abusing drugs are likely to get pregnant. Many of the employed youth who abuse drug lose their jobs due to absenteeism and sometimes inefficiency. Drug use is known to lower performance and productivity. In some cases some of the youngsters may resort to embezzlement, forgery, corruption, bribery and extortion in order to many their drinking habits. Prolonged drinking and use of drugs in some situation leads to psychiatric disorders such as delusional state and chronic dementia. It may lead to death from, for example alcoholic poisoning. Overdose of some of the drugs cause death and prolonged use of most of them lead to a host life threatening diseases.

Drug use leads to poor performance in learning. Drugs erode self discipline and motivation necessary for learning. Research shows that drug use leads to declined in academic performance. Drug use is closely tied to being truant and dropping out of school. Those
using drugs are mostly likely to skip school. A research in Philadelphia shows that dropouts were almost twice as likely to be frequent drug users. Drug use is associated with crime and misconduct that disrupt the maintenance of an orderly and safe school atmosphere conducive to learning. It leads to distraction of school property and classroom disorder as was seen in many Indian schools in the last years. Drug use has also been linked to law breaking and involvement in other form of crime. Drug users engage in fights, distraction and disrespect to others. Some steal from family members, friends or employers to buy drugs. Police records indicate relations between alcoholism and various aggressive and criminal acts. Investigation by sociologists and scientists on alcoholism crime relationship reveal that there is a resemblance between structure of alcoholics and criminals. Crimes are usually planned in liquor shops and bars where alcohol is sold. The offenders generally consume alcohol or liquor to overcome their inhibitions and emotional strains. Alcohol and narcotic help remove the element of self criticism from the criminal in relation to himself and his acts. The illegality of purchase and possession of alcohol and narcotic drugs make alcoholic and drug addicts delinquent. Alcoholism and drug addiction being a conduct forbidden by law lead to related crimes like illicit spirit distilling and alcoholic brewery, smuggling of intoxicating drugs, racketeering, underhand deal in transmission of alcohol and narcotics from one place to another and bribing officials to escape arrest and punishment.

VI. SOLUTION TO THE DRUG PROBLEM

We should not delude ourselves that there are short, swift or easy solutions to drug abuse problem. As one French social worker said, “Any person or any community hoping to change a specific delinquent problem must accept the fact that it is a long thoughtful process, often of discouragement and delay. It is expensive in terms of money, time and effects. It needs hardly be pointed out, however, that the result of delinquency or anti-social behavior is twice as costly”. The problem of anti-social behavior is for the whole community and should not be left to a few institutions like schools churches police and courts and professionals like psychologists, psychiatrics and social workers. It should be recognized as their own problem by every individual in the community even if their own children are not involved. The India government has recognized the seriousness of the drug problem and The Narcotic Drugs and Psychotropic Substance Act, 1985, were enacted with stringent provision to curb the menace. The Act envisages a minimum term of 10 years imprisonment extendable to 20 years and fine of Rs. 1 lakh extendable up to Rs. 2 lakhs for the offenders.. As a first step to prevent and control drug abuse, parents should be sensitized on the dangers of drug abuse, the attendant problems and their functions as role models. They should be encouraged to teach standards of right and wrong. They should instill in the youth, habits, skills and attitudes that will help them become better citizens. Parents should be able to help children resist peer pressure to use alcohol and other drugs by supervising their activities, knowing who their friends are and talking to them about their interests and problems. They should be knowledgeable about drugs and signs of drug use and when
symptoms are observed, response should prompt. Schools should have a drug prevention curriculum from Kindergarten onwards teaching that drug use is wrong and harmful. There should be collaborative arrangement with parents, school boards, law enforcement officers, treatment organizations and non-governmental organizations. There is also need for the school to be in contract with social workers and counselors. These trained personnel should be able to evaluate and relieve the pressure that often contribute to the child’s failure. The government should train and procure teachers who have demonstrated their activities to work with the children.

Education curriculum should not be too stressing. Schools should be able to offer education serves different needs, abilities and talents. Schools should be able to determine the extent and character of alcohol and other drug use and monitor it regularly. Clear and specific rules regarding drug use that include strong corrective action should be established. Students should be encouraged to use their understanding on the dangers of drug use to help other students avoid it. They should encourage other students to resist drugs and persuade those using them to seek help and report those using them to seek help and report those selling drugs to parents and school authorities. There is need for initiation of rehabilitation programs for drug dependent persons. For the programs to succeed there is need for continuity and a high degree of co-ordination and a close co-operation between private and government agencies if their existence is to make sense. Guidance personnel like psychologists, psychiatrists and social workers should be readily available and accessible. Counseling, psychotherapy and treatment should be availed. Family based treatment has been found to be especially effective with young drug and alcohol abusers. It is said to be more difficult to initiate in adulthood when a majority of people no longer reside with the parents. For drug abusers who happen to be prosecuted, the courts should be able to give them a chance to reform through probation. The personal supervision and guidance by a probation officer provides re-education rather than punishing. Personal and frequent communication and influence of probation officers is deemed of greatest importance. Experience has shown that various preventive and punitive measures such as fine, imprisonment or detention for drunkenness and other disorderly behavior have failed in eliminating this menace. The police should do more to curb drug trafficking. Some psychologists and sociologists in fact have advised that children should be introduced to drinking alcohol quite early in life so as to destroy the growth of the desire to taste the forbidden stuff which children reared in restrictions’ families suffer. This is seen as one way of controlling alcohol use. If drug abuse is not controlled now, the country is headed for doom where a large number of able bodied India could end up as vegetables. The drug problem cannot be effectively dealt without addressing the conditions which lead to its existence in the first place. Government poverty reduction programs should be able to target the problem of housing, unemployment and recreation facilities for the poor sections of the society if any effort is to make headway. The programs have to be well funded and undertaken with the help of professionals. There is also need for consistency to ensure continuity. In this way there can be light at the end of the tunnel.
VII. CONCLUSION

Drug abuse is a very common and major problem related to health and social issues which is associated with co morbidities and complications. The initiation of drug abuse at early adolescence result in continuation of drug to the adulthood. Therefore, preventive strategies are required to be planned and suggested for drug abuse. More studies on drug abuse are required to be done in India to see the current situations and to find out the solutions for this situation. As most of the studies are either done on small scale on school children or street children, this is the demand of the hour for the bright future of nation.

VIII. REFERENCES


TO CITE THIS PAPER