

DRUG ADDICTION: A THREAT TO MODERN SOCIETY

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ABSTRACT -This paper explores the phenomenon of drug abuse among the youth in India. The paper includes with the factors responsible for drug abuse, review of literature available, on the extent and demographics of drug abuse used in India. The paper concludes with preventive strategies are required to be planned and suggested for drug abuse. It is also suggested that more studies on drug abuse are required to be done in India especially in Punjab to see the current situations and to find out the solutions for this situation.

Key words: youths, factor responsible, Drug abuse, and cure.

INTRODUCTION

Drug addiction is the worst social evil of modern society. It is spreading like cancer. The misguided and frustrated adults are the prey of this habit. Mostly of rich families, these people are becoming habitual of using drugs such as Heroine, Smack, Opium, Charas, Cocaine, Ganja and Brown sugar. Drug addiction is a part of western culture. It is thought it is a thing of fashion and modernization. The worst aspect of this social evil is that if you start taking drug in fun or fashion, it becomes so habitual that it cannot be left easily. It is an invitation to death. This evil is reaching and spreading in Asian and African countries. **Drug addiction is self- destruction.** This may take sometimes as we see in case of cancer, but it is a sure stepping towards death. In the other words, Drug addiction is a brain disease. The addicts become depend on the drug. The addicts use it, despite having full knowledge of its harmful effects on health. It is also considered a brain disease because it changes the structure and functioning of brain.

India is caught in a geographical drug nightmare sandwiched between the so-called Golden Triangle (areas covered by Thailand, Myanmar and Laos) and the Golden Crescent (areas covered by Pakistan, Afghanistan and Iran) and has been widely used by the smugglers as a transit and exit country. The transit country also usually becomes the user country. Drugs have become big business. There is an international network of drug paddlers. In fact international drug trafficking has got an impetus with what has come to known as narco-terrorism. Terrorists to raise funds for their activities become drug peddlers. For example, Recently in Punjab many druggists are died due to drug overdose. A recently government study suggest that more than 860000 young men in the state between the age of 15-35 years take some form of drugs. Heroine is the most preferred used but 53% of all addicts. But opium and synthetic drugs such as crystal methamphetamine are also common the terrorists in Sri Lanka raised funds by selling heroin in Canada, West Germany and France. In India, the BSF and the Customs authorities have been seizing a lot of drugs at the borders and airports. Thus with the advent of narco-terrorism drug addiction has assumed wider and international dimensions. Some governments also encourage drug traffic. Hence, it has become difficult to fight drug trafficking.

FACTORS RESPONSIBLE DRUG ABUSE

The factors responsible drug abusers have mainly been classified into following categories.

- **Environmental Factors**

A person's environment includes various factors such as his social status, family, friends, professional life, etc. Problems in the family, bad company, competition at work and lack of proper guidance and support from parents or teachers can often lead to drug abuse.

- **Biological Factors**

Drug abuse can also be a genetic problem. A child stands a high chance of falling prey to drug abuse if either of his parents has been under the influence of the same. Certain mental disorders can also cause a person to turn towards drugs.

- **Unemployment**

Unemployment is the major factors which enhance the youth to involve in drug abuse. Punjab has faced a slowdown in agricultural productivity, a mismatch between educational qualifications of high school graduates and the skills required as an agricultural labourer, a "demand for migrant labourers instead of local labourers" is the main reason.

- **Age Factor**

Though drug addiction can develop at any age however those who begin taking drugs at an early age have a high chance of getting addicted. This is because those areas in their brain that are responsible for self-control, judgement and decision making are still in their development stage. This is the reason why teenagers are more prone to drug abuse.

LITERATURE ON DRUGS ABUSE

Drug abuse is a very common and major problem related to health and social issues. The following studies have been done on the drug abuse.

Singh, Gupta and Jindal's (2000) study similarly finds a large demographic of drug users in Punjab coming from the agricultural sector. In addition, it reveals the abnormally large scale in which drug addiction is occurring. In interviewing 289 female attendees at the Annual Farmers Fair (*Kisan Mela*) in Ludhiana, March, 2000, they found that "about half of the respondents were of the opinion that fifty per cent, or more, of male adult inhabitants in their native villages were addicted to one or more than one type of drugs".

World Health Organization (2002) estimates that there are about 2 billion people worldwide who consume alcoholic beverages and 76.3 million with diagnosable alcohol disorders. Alcohol causes 2.3 million deaths and loss of 69 million of disability adjusted life years.

National Survey (2004), on extent, pattern and trend of drug abuse conducted at the behest of Ministry of Social Justice and Empowerment (MSJE), Government of India and United Nations indicates that among males 12-60 years, drug abuse is quite common in the country. Tobacco was the most frequently used substance (55.8%), followed by alcohol (21.4%), cannabis (3.0%), opiates (0.7%) and sedatives (0.1%). About 15 million persons addicted to alcohol and various kinds of other drugs need urgent attention for their treatment, rehabilitation and reintegration into social mainstream. It was found that the five states reporting the largest numbers of drug users in descending order were Uttar Pradesh, Maharashtra, Punjab, Bihar, and Kerala.

A study in Jaipur by **Singh et al (2006)** on students of classes 9-12, aged between 13-18 years reported that 2.1 % boys and 1.7% girls were tobacco users. Smoking cigarettes was present in 72.8 % boys and 50.0% of girls with drug abuse. Smoking and tobacco use was more in adolescents who have families using tobacco and smoke (86.4% in boys and 68.8 % in case of girls).

A study by **Saluja et.al (2007)** on adolescents at Postgraduate Institute of Medical Education and Research, Chandigarh showed that there was a consistent rise in adolescents registered in De-addiction OPD, 27 in the first 20 years (1978-1997), 31 over the next four years (1998-2001) and 27 over the final 2 years (2002-2003). These findings showed that there is increase in the number of adolescents reported for treatment in the last few years which indirectly indicates the increase in drug abuse among adolescents.

In another study by **Juyal et al (2008)** on substance abuse on inter college students showed that 58.7% students were ever users while 31.3 % were regular user of any drug. It was found that the regular drug abuse was higher in urban students as compared to rural ones (Urban – 37.9% and Rural – 24. 4%).The study also stated that the drug abuse was more prevalent among male students than female students.

In a study of 200 patients in a drug de-addiction centre in Punjab, **Kalra and Bansal (2012)** found the majority of patients to be young married men working either as labourers or farmers in the rural areas of Punjab. Their findings reveal most patients to be male (100%), married (76%), residing in rural areas (85.5%), and working as farmers (42.5%). Whilst most of the patients were perhaps too old to be considered youth, the problem of drug addiction itself can nevertheless be framed as a youth problem. This is because it marks the time around when men are most vulnerable to addiction and most likely to begin taking to drugs. The study found that the average age of patients at the time they began substance abuse was 25 years of age.

A study by **Vikram kumar gupta et.al (2013)** 7 DDCs run by Indian Red Cross Society & 3 DDCs being run by Private registered societies located in various districts of Punjab were included. A pretested questionnaire was used to interview the patients who were admitted. 120 patients was interviewed. All were males. 47.5% were in age group of 20-30 years. Mean age of starting drug abuse was 21.15±5.29 years. 79.2% patients started drugs due to peer pressure. 59% belonged to rural area. 46% were in upper middle socioeconomic status & 65% patients were married. Patients were using more than one route and 13.3% were on IDU. As per single drug usage, 20.8% were addicted to alcohol & 20.8% to capsule. As per multiple drug usage, 62.5% were tobacco addict, 42.5% to alcohol & 40.8% to capsule. Rs 170.63 was the average amount spent per day. 85.0% patients were dependent on self for buying drugs. 16% patients had positive family history of drug abuse. 60% patients were brought to centre by family members. 39.2% patients had positive history of previous treatment at any other DDC.

Sharma Priyanka and Tyagi Ankita(2016) 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.

DIFFERENT WAYS TO CURE DRUG ABUSE

Although it is difficult to cure the drug addicted persons. But there are ways to cure the problem of drug abuse as followings:

- **Expert Guidance**

It is suggested to visit a doctor and seek proper medication to overcome this problem. Most of those who are suffering from this grave problem are recommended to join a rehabilitation centre to control it.

- **Eat Right and Exercise**

The damage caused due to drug abuse must be replenished in order to become physically and mentally fit and this can only be done by having a healthy diet. It is also suggested to exercise regularly in order to keep stress at bay.

- **Friendly environment**

It is suggested that when we treating the addicted person we should have the friendly atmosphere at home as well as the drug de addiction centres. Drug abuse prevention starts with parents learning how to talk with their children about difficult topics. Then, the programs offered by school, sports, and other groups can support what you have started.

CONCLUSION

Drug abuse, mainly caused in an attempt to overcome emotional upheaval in one's life, can be self damaging. It is suggested to stick to a healthy lifestyle and steer clear of unhealthy practices such as dependence on drugs or alcohol to stay fit and active. The youth of Punjab is falling in vicious trap of drug abuse at early age with high rates of relapse. There is urgent need

to cover all schools and colleges and universities with awareness programmes to warn the youth population against drugs. Educated youth is falling in bad habit of drug abuse which is an alarming situation and due to this, his/her studies are affected and whole academic carrier is destroyed. Support for substance abuse education, prevention and treatment must come from all sides including families, community groups, schools, policymakers, and health professionals.

A vocational rehabilitation like training in tailoring, carpeting or computer courses must be financed and supported at all DDCs to reintegrate the de-addicted persons into social mainstream. It is recommended that all DDCs should be supervised periodically by government authorities from the office of Civil Surgeon/Deputy Commissioner.

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.

More action needs to be taken to prevent drug addiction from occurring in the first place. The frightening possibility of an entire generation in Punjab being lost to drugs, whether it is through AIDS or drug overdose, signifies an urgency required for recognising the problem's socio-economic dimensions and tackling it through preventive measures.

Govt should punish the people involved in selling, supplying the drugs to youths. Its kind to save our younger generation. Instead of blaming each other we should work together to control drug abuse. It should be started from each home, locality and city etc. Let's work together to control the worst situation of our society.

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