JETIR.ORG

JOURNAL OF EMERGING TECHNOLOGIES AND



INNOVATIVE RESEARCH (JETIR)

An International Scholarly Open Access, Peer-reviewed, Refereed Journal

Drug Addiction: A Reflection on Youths of Tripura

* Dr. Madhumita Debnath, PGT, Henry Derozio School, Agartala & ** Prof. Chandrika Basu Majumder, Dept. of Political Science, Tripura University

Abstract:

Drug addiction is an international issue that puts people's lives, societies, and the political stability and security of many nations in grave peril. The United Nations said in 2005 that the use of illicit drugs has increased globally and that the main global trend is the rising accessibility of various narcotics among an ever-widening range of consumers. The fact that young people attending school and colleges appear to be the new target market for the global pharma industry is quite concerning. The goal of this study is to comprehend the issues that respondents experience as a result of their drug addiction and how these issues directly impact their families, their social networks, and society, with particular emphasis on growing future generation.

The study intended to comprehend the issues that respondents with drug addiction cause for their families, social networks, and society as a whole, with particular reference to young people from Tripura's west region. The kids and youngsters or adolescents from West District were the study's target group. The study area and each respondent were chosen through the use of purposeful sampling. Using systematic sampling, a total of 100 respondents from areas of Tripura's west district—have been chosen. Data collection involved the use of interview schedules.

Keywords: Drug addiction, youngsters, adolescents, family, society, West Tripura.

Introduction:

Drug addiction has spread throughout the world, and young people in particular are becoming dependent on various narcotics and stimulants that have narcotic effects. Addicts live in a foreign world and lose touch with their family, which spoils their life in every way. They spend a lot of money on drugs before looking for criminal ways to make money. There are many harmful drug side effects, especially when we compare them to health issues.

Due to the fact that drug consumption is such a big issue in today's culture, drug addiction among young people is on the rise in Tripura. The source claims that young people between the ages of 18 and 30 are addicted to substances like charas, ganga, as well as dendrite, phensedyl, corex, heroin, yava, and many other addiction-inducing pills. The majority of those impacted by drug use are students in schools and colleges. Young people abused by drugs, increasing its pace creating negative impacts on society.

Young adults who have recently begun college or relocated to a new place in search of employment frequently encounter numerous issues and difficulties in their daily lives. They are more likely to use drugs and other similar

substances to reduce stress. It frequently seems simpler to find a quick remedy than to face and handle the actual issue. Trying illicit drugs can result in addiction and develop into a lifelong habit.

Contemporary world is extremely competitive, and it is challenging to advance in one of these environments. Both young and old people, but particularly young people, are always under peer pressure. It is rarely noticeable, though, most of the time. For this reason, many young people anticipate feeling pressured to try drugs, smoke, or consume alcohol. Being the person who doesn't use alcohol or smoke might be challenging for young people. Due to their sense of loneliness and exclusion from society, they develop a habit of using drugs, which eventually turns into an addiction.

Another reason why young people become hooked to drugs is exposure to drug usage in the environment in which they are raised. If a person grows up around drug use among adults, they are more inclined to experiment with drugs on their own. A person who uses drugs for the first time frequently receives recommendations from friends, coworkers, and elders. It's crucial to lead by example if you want to keep your children away from drugs and other addictive substances. The greatest strategy to avoid drug addiction is to offer accurate information and awareness campaigns about the effects of drugs.

Review of Literature:

McConnell (1983) defined that "A drug is usually defined as any substance that can affect the structure and function of the body." To be more clear, what McConnell stated, "A drug is any chemical which when taken in relatively small amounts, significantly increases or decreases cellular activities, somewhere in the body." ¹

Drug misuse is a significant global public health issue, according to UNODC (2005). Numerous teenagers who are in school participate in mental health programmes, either temporarily or for an extended period of time. Some students go crazy; don't fit in at school, and eventually quit. Fawa defines a drug as any substance that is utilised to treat or prevent disease in both humans and animals. Drug use affects how the body operates, either favourably or unfavourably, depending on the user's body type, the drug's type, dosage, and whether it is used alone or in conjunction with other substances.²

Drug abuse, according to Haladu, is defined as excessive and ongoing self-administration of a drug without consideration for socially or culturally acceptable behaviours. Insofar as it affects a person's ability to operate socially and healthily, it is also considered drug usage.³

Although there is disagreement over what exactly qualifies as an addiction, it is generally accepted that people can become addicted to any substance. As an illustration, consider alcohol, amphetamines, cocaine, nicotine, opioids, sedatives, hallucinogens, inhalants, cannabis, phencyclidine, caffeine, and a large number of other chemicals that, when ingested, breach the blood-brain barrier and change the brain's normal chemical functioning.⁴ Early onset and chronic alcoholics both had cognitive abnormalities, according to Pishkin et al. (1985). The results showed that, regardless of the length of problem drinking, an early initiation of alcoholism is highly predictive of cognitive impairment.

¹ McConnell, J.V. (1983) Understanding Human Behaviour. 4th Edition, Holt, Rinehart and Winston, New York, pp. 67-73

² Fawa, M. S. (2003). Drug abuse eradication programme in schools: the relevance of team, approach alternative, in A. Garba (Ed) Youth and drug abuse in Nigeria: Strategies for counselling, management and control, Kano: Matasa Press.

³ Haladu, A. A. (2003). Outreach strategies for curbing drug abuse among out-of school youth in Nigeria: A challenge for community Based Organization (CBOS), in A. Garba (ed). Youth and drug abuse in Nigeria: Strategies for counselling, management and control. Kano: Matosa Press.

⁴ Pishkin, V., Lovallo, W. R. & Bourne Jr., L. E. (1985). Chronic Alcoholism in Males: Cognitive Deficit as a Function of Age of Onset, Age, and Duration Alcoholism. Clinical and Experimental Research, 9(5), 400–406.

According to the DSM-IV-TR of the American Psychiatric Association (APA), the term "addiction" refers to a persistent pattern of behaviour that persists despite having negative effects. Students have a very high level of understanding about how detrimental substance usage is, according to Tsering et al. (2010). Even though they were aware of the negative impacts of substance use, the users were successful in convincing their peers.⁵

Socialising included doing things like drinking, smoking, and using drugs. When compared to urban adolescents, Donath et al. (2011) found that a greater proportion of rural adolescents engaged in binge drinking. They smoked in a variety of settings, including bars, clubs, parks, parties, school grounds, their bedrooms, and while travelling to and from school.⁶

Meager social support, family strife, parental drinking, and low and high economic status were reported to appear to increase the likelihood of alcohol usage in research investigations. The findings showed that drug users are less likely to be in good mental and physical health, have low self-esteem, and have lower academic achievement, which has a negative impact on their involvement in school and social interactions.⁷

Tyas and Pederson (1998) focused on socio-demographic, environmental, behavioural, and personal factors with smoking and discovered that adolescent smoking was linked to a number of factors, including age, ethnicity, family structure, parental socioeconomic status, personal income, parental smoking, parental attitudes, sibling smoking, peer smoking, peer attitudes and norms, family environment, attachment to family and friends, school factors, risk behaviours, and lifestyle factors.⁸

Many indigenous cultures have used drugs in one way or another as part and parcel of religious rituals over the years. Different drugs have been preferred by various cultures, with the decision frequently being influenced by the climate and occasionally by trade.⁹

When someone feels alone for psychosocial, financial, or cultural reasons, their need to belong draws them to other people who share their isolation and who may have turned to drugs for solace or escape. Drug subcultures are born as a result of this, and these subcultures blame society for their isolation and, in turn, blame society for their members' abnormal, antisocial behaviour. Being welcomed into a new atmosphere where using drugs is acceptable may and frequently does have terrible effects on both the individual and society.¹⁰

The frequent patterns of abnormal behaviour displayed by drug users are therefore not surprising. When traditional family groups and social values are being rejected, engaging in such behaviour can be a way to win over peers and be accepted into a group because it is frequently perceived by young people as sophisticated and adult behaviour.¹¹

Conceptual clarity of the concepts and variables employed, as well as the current perception of addicted teenagers, are provided by the aforementioned introduction and the reviewed literature. However, there is a sensed need to conduct research to comprehend and identify the various co-related aspects of adolescent drug addiction. In light of this, the current study is intended to offer fresh perspectives and open up new horizons to assist addicted teenagers in resuming their normal lives by enhancing their capacity for adjustment, self-efficacy, and socio-psychological competence.

⁵ Tsering, D., Pal, R. & Dasgupta, A. (2010). Substance use among adolescent high school students in India: A survey of knowledge, attitude, and opinion. Journal of Pharmacy & Bio-Allied Sciences, 2(2), 137-140.

⁶ Donath, C., Gräßel, E., Baier, D., Pfeiffer, C., Karagülle, D., Bleich, S. & Hillemacher, T. (2011). Alcohol consumption and binge drinking in adolescents: comparison of different migration backgrounds and rural vs. urban residence - a representative study. BMC Public Health, 11(84), 1471-2458.

⁷ Tyas, S. L. & Pederson, L. L. (1998). Psychosocial Factors Related To Adolescent Smoking. Tobacco Control, 7(4), 409-420.

⁸ ibid

⁹ Stockley, D. (1986). Social Reality of Drug problem (2nd ed.). London, England: Ebury Press. P-22

¹⁰ Kennedy, P. (1996) Preparing for the Twenty First Century London, P. 43

¹¹ Aggarwal, R.K. (1994) Drugs and Addictive Behaviour Delhi, P. 55-62

Objective:

- 1. To find out the economic background of drug abusers.
- 2. To explore the different causes of drug addiction among the adolescents of West Tripura.
- 3. To explore the impact of drug abuse.

Research Methodology:

Research methodology refers to the precise methods used to find and choose information about a subject. For the current study, a descriptive research methodology was used to better understand the issues facing young people who use drugs. The research was kept exploratory so that each respondent's issues could be considered subjectively throughout the research process. Survey research is the methodology used, and only a small sample of the population is researched. The study is based on primary data. The target population is from Tripura's west district, i.e., selected respondents were interviewed to obtain average statistics for the study. For this study, a total of 100 participants were chosen, randomly by snowball sampling method. The West District is one of Tripura's eight districts. In the Indian state of Tripura, there is a district known as the West district. The district's administrative centre is in Agartala, the state capital. In Tripura's eight districts, it has the highest population as of 2012. West Tripura district is bordered on the north and west by Bangladesh, on the east by Khowai district, and on the south by Sepaihijala district. The overall area of the district is 983.63 square kilometres following the creation of four new districts in the state of Tripura.

Analysis and Findings:

Analysis has been made to find out the economic background of drug abusers: to explore the different causes of drug addiction among the adolescents of West Tripura; and to explore the impact of drug among the abusers-through the following tables.

Table: 1 Age Distribution among Drug Abusers

Age	Rural Frequency	Urban Frequency	Total	Percentage
< 15 years	2	6	8	8%
16-20 years	7	16	23	23%
21-30 years	12	39	51	51%
31-40 years	6	4	10	10%
> 40 years	3	5	8	8%
Total	30	70	100	100%

The above table shows the age distribution among drug abusers, where it has been found that more than half (51%) of the respondents are 21-30 years of age, followed by nearly one-fourth (23%) of the respondents whose age is between 16-20 years, 10% of the respondents is between 31-40 years, and 8% percent from both less than 15 years as well as above 40 years. Moreover, it has been found that more (39%) numbers of respondents are from urban area followed by 12% of the respondents from rural area from 21-30 years of age: followed by 16% of the

respondents from urban area and 7% from rural area from the age group of 16-20 years. So the table shows that urban respondents are more addicted towards drugs which are a youth group from West Tripura district.

Table: 2 Educational Levels of the Drug Abusers

Educational Level	Frequency	Percentage
Below Class V	17	17%
Class V	16	16%
Class X	11	11%
Class XII	22	22%
Graduation	27	27%
Post-graduation	5	5%
Above Post Graduation	2	2%
Total	100	100%

The above table 2 shows the educational levels of the respondents, where it has been found that maximum (27%) of them are graduates, followed by 22% of the respondents who are higher secondary (XII) passed, 17% have educational level below class five(V), 16% of the respondents have educational qualification of Class five(5), 11% of the respondents have qualification of secondary level, i.e., class ten(X), 5% have qualification of post graduation and a very less percentage, i.e., 2% of the respondents have qualification above Post-graduation. So, it reveals that upto graduate level youngsters are more inclined towards drugs.

Table: 3 Employment statuses among Drug Abusers

Occupation	Frequency	Percentage
Students	42	42%
Self-employed	17	17%
Part-time employee	12	12%
Full-time employee	14	14%
Any Other	15	15%
Total	100	100%

The above table 3 shows the employment status of the respondents, where it has been found that 42% of the respondents are Students who still continuing their studies at different levels, followed by self-employed (17%), Full time employee (14%), Part-time employee (12%) and 15% of the respondents, who reveals Other kind of occupation or employment status which is not even clear to them.

Table: 4 Level of Monthly Family Income of Drug Abusers

Level of Monthly Family Income (in Rs.)	Frequency	Percentage
Less than 5000	24	24%
5001-15000	21	21%
15001-30000	29	29%
30001-50000	12	12%
More than 50000	14	14%
Total	100	100%

The above table 4 shows the monthly family income of the respondents, where it has been found that nearly one-third (29%) of the respondents monthly family income of respondents is between Rs. 15001- Rs. 30000, followed by nearly one-fourth (24%) of the respondents whose monthly family income is less than Rs.5000, more than one-fifth (21%) of the respondents' monthly family income is between Rs. 5001 – Rs.15000, 14% of the respondents' monthly family income is between Rs. 30001 – Rs.50000. So it reveals that drug abusers are from different levels of monthly family income group.

Table: 5 Causes of Drug Addiction

Causes	Frequency	Percentage
Genetics and Family History	8	8%
Peer group pressure	23	23%
Trouble relationship	12	12%
Stress in Life	10	10%
Low economic status	7	7%
Mental disorder or depression	4	4%
Low social status	9	9%
Domestic Violence or negligence from family members	8	8%
Lack of friends	5	5%
Huge academic pressure	8	8%
Traumatic events	6	6%
Total	100	100%

The above table 5 shows the causes of Drug addiction among the respondents, where it has been found that the main causes related to drug addiction in Tripura includes Genetics & family history; environmental cause and psychological cause. Drug abusers may be more prone to addiction due to Genetics. The way your ancestors responded to a particular medicine is how our body and brain respond to it. Chances of becoming hooked to drugs significantly increase if your parents have a history of drug misuse, where it has been found that 8% of the respondents only belonged to this category of Genetics and family history.

The environment we live in is equally important in the emergence of drug dependence. Growing up in a home with a drug addict increases the likelihood that the child will battle with drugs as well because environment influences behaviour. In addition, there are additional environmental elements that can fuel drug addiction. It includes - Abuse of drugs among friends and peers (23%), Lack of social and economic support (16%), Troubled relationships (12%), Stress in life (10%), Domestic Violence or negligence from family members (8%), Low socioeconomic status (7%) – which has been revealed after the study.

Drug addiction is largely influenced by heredity and environment, but psychological elements are also at play. Everything from physical or sexual abuse to peer and parental neglect to domestic violence can cause psychological stress. And to relieve this stress, individuals turn to narcotics. This drug abuse can eventually develop into an addiction. Other psychological cause includes - Mental disorder such as depression (4%), Lack of friends (5%), Huge academic pressure (8%), and Traumatic events (6%). Thus it has been found that the drug abusers are more or less influenced by Genetics & family history; environmental cause and psychological cause though more it was with peer group pressure which is part of environment for a respondent as a Drug abuser.

Table: 6 Impact of Drug Abuse

Impact of Drug Abuse	Frequency	Percentage
Feel bad or guilty after drug used	67	67%
Fights with other under the influence of drugs	39	39%
Engaged in illegal activities to obtain drugs	27	27%
Arrested for possession of illegal drugs	21	21%
Experienced sickness while not taking drugs	61	61%
Damaged relationships with family / friends	73	73%
Loosed job/s	34	34%
Financial trouble	82	82%
Sexual abuse	0	0%
Accidents and injuries	8	8%
Legal consequences (e.g. going to jail)	11	11%
Faced negligence from neighbours	43	43%
Faced negligence from Relatives	56	56%

The above table 6 shows the impact of Drug abuse on the respondents as abusers, where it has been found that 67% of the respondents feels guilty of being a drug addict, 61% of the respondents experienced sickness while not taken drugs, 73% of the respondents damaged family relations as well as friendship due to abusive use of drug, 39% fights with other under the influence of drugs, 27% engaged themselves in illegal activities by consuming abusive drugs, 34% loosed their jobs due to this addiction, 43% percent of the drug abuser respondents faced negligence from relatives also, 8% of them also faced accident due this addiction of drug and lastly, more than for-fifth (82%) of the respondents faced financial trouble also due to this addiction of drugs. So, it reveals all the impact of drug addiction on personal and social aspects.

Conclusion: From the above analysis revealed that in West Tripura, more than half (51%) of the respondents are 21-30 years of age, followed by nearly one-fourth (23%) of the respondents whose age is between 16-20 years, who are from more from urban area. Among them, maximum have completed higher secondary or graduation, also it has also been found that still maximum (42%) of them are studying. The drug abusers are from all levels of monthly family income group. They are more or less influenced by Genetics & family history; environmental cause and psychological cause though it was more with the influence of peer group pressure which is part of environment for a respondent as a Drug abuser. Also, it reveals all the impact of drug addiction through different aspects of personal and social sphere.

BIBIOLOGRAPHY

Ahuja (2016). "What constitutes prescription drug misuse? Problems and pitfalls of current conceptualizations". Curr Drug Abuse Rev 1 (3): 255–62.

Antai-Otong, D. (2008). Psychiatric Nursing: Biological and Behavioral Concepts. 2nd edition. Canada: Thompson Delmar Learning

Barrett SP, Meisner JR, Stewart SH (2008). "What constitutes prescription drug misuse? Problems and pitfalls of current conceptualizations".

Chambless, D.L. (1998). "An update on empirically validated therapies" . Clinical Psychology (American Psychological Association) 49: 5–14. Retrieved 2008-03-24.

Feidler (2010). "Subtypes of nonmedical prescription drug misuse". Drug Alcohol Depend 102 (1–3): 63–70.

Madan (2014). "Development of a rational scale to assess the harm of drugs of potential misuse". The Lancet 369 (9566): 1047–1053.

Nutt, D.; King, L. A.; Saulsbury, W.; Blakemore (2007). "Development of a rational scale to assess the harm of drugs of potential misuse".

Pertica and Leary (2011). Drug abuse definition, Sixth Edition, Nursing diagnoses.

Palen (2013). Drug addiction and drug abuse. In L.S. Goodman & A. Gilman The pharmacological basis of therapeutics (5th ed.).

Strohl (2015). Drug addiction and drug abuse. In L.S. Goodman & A. Gilman (Eds.) The pharmacological basis of therapeutics (5th ed.). New York: MacMillan. pp. 284–324.

