

PREVALENCE OF SUBSTANCE USE AMONG NEIGHBOURHOOD COMMUNITY ADOLESCENCE IN CHENNAI

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Abstract: Adolescence use of substance is one of the major concerns in their behavior and family. 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 substance of abuse nature. The adolescent period is considered as energetic, vibrant and essentially they have to focus on education, employment at the age of 10 to 20 but the large number of this group is addicted on substances like alcohol, pan, tobacco, cannabis, glue, fevicol which reflects on various consequences such as in school by bunking classes, low marks in the exams, not maintaining good relationship with their parents also facing health issues on both physically, mentally and emotionally. To study the demographic profile, family background, reasons and forms of substance abuse and to understand the consequences of substance abuse among adolescents in Neighbourhood Community of Chennai.

Keywords: Adolescence, Substance abuse, Relationship, Neighbourhood Community

INTRODUCTION

Substance abuse represents a major concern to our society. The epidemic of substance abuse in young generation has assumed alarming dimensions in India. Changing cultural values, increasing economic stress and dwindling supporting bonds are leading to initiation in to substance use. Cannabis, heroin, and Indian-produced pharmaceutical drugs are the most frequently abused drugs in India. Drug use, misuse or abuse is also primarily due to the nature of drug abused, the personality of the individual and the addict's environment. The processes of industrialization, urbanization and migration have led to loosening the traditional methods of social control rendering an individual vulnerable to the stresses and strains of modern life. The various physiological changes, psychosocial stressors and emotional factors confronting adolescents seem to make them particularly susceptible to adverse effects of alcohol and drugs. The use of opiates, cannabis, tobacco, and alcohol has been well recognized for centuries in India.

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In India the use of drugs and alcohol within the context of religious beliefs and local traditions has been historically documented. Children and adolescents are exposed to alcohol, cannabis products, and tobacco product. In India the use of pan masala and home brewed products containing marijuana and alcohol have special significance. Pan Masala is shown to have carcinogenic, genotoxic, and clastogenic properties.

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In this study researcher aims at finding out the education status of the family as well as the respondent and how much they are spending for substance per month and their use of substance and also to found how it reflects in their life.

BACKGROUND OF THE STUDY

Substance abuse refers to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. Psychoactive substance use can lead to dependence syndrome - a cluster of behavioural, cognitive, and physiological phenomena that develop after repeated substance use and that typically include a strong desire to take the drug, difficulties in controlling its use, persisting in its use despite harmful consequences, a higher priority given to drug use than to other activities and obligations, increased tolerance, and sometimes a physical withdrawal state.

Policies which influence the levels and patterns of substance use and related harm can significantly reduce the public health problems attributable to substance use, and interventions at the health care system level can work towards the restoration of health in affected individuals. It is known that, what can and needs to be done to help reduce the burden of psychoactive substance use. Therefore, WHO is committed to assisting countries in the development, organization, monitoring and evaluation of treatment and other

services, the harmful use of alcohol results in 2.5 million deaths each year, 320,000 young people between the age of 15 and 29 die from alcohol-related causes, resulting in 9 per cent of all deaths in that age group, at least 15.3 million persons have drug use disorders and Injecting drug use reported in 148 countries, of which 120 report HIV infection among this population.

LITERATURE REVIEW

WHO classifies the substance among adolescents into five categories such as; WHO lexicon of alcohol and drug terms, Psychoactive substances, ICD-10 classification of mental and behavioural disorders, Diagnostic and statistical manual of mental disorders and Diagnostic categories and terms.

Neighbourhood Community constitute the most important and persistent problem of urban life; they are considered as the chief sources of crime and delinquency, of illness and death from disease. Neighbourhood Community are of all types' shapes and forms. It varies from one type to another, but certain general patterns of slum life are universal.

To begin with, it talks of the basic needs that 'family', as a social unit, serves vis-à-vis those who are part of it. Primarily, the family is a consistent group with a certain commitment to the mutual welfare of its members. It is expected to establish a household, functioning systematically, with the objective of ensuring the physical and psychological welfare of all the participant-members. Anything that undermines or shatters these expectations is threatening, and it becomes contraindicative to the fundamental purpose of the establishment.

The World Anti-Doping Agency has approved the list of prohibited substances for 2011 with several changes made from previous year, including addition of a section to address abuse of pharmacological substances, removal of mandatory Declaration of Use for specific substances not prohibited. The WADA Executive Committee also reviewed the controversial "whereabouts" clause which required the athletes to give information about their location to the International Sport Federation (IF) or National Anti-Doping Organisation (NADO) three months in advance. The new List will now be made official and published by October 1, 2010. It will take effect on January 1, 2011. "The annual revision of the List is a consultative process facilitated by WADA, beginning with the circulation of a draft List among stakeholders," WADA said in a statement. "Comments received are considered by WADA's List Expert Group, which then presents its conclusions to WADA's Health, Medical and Research Committee. The latter in turn submits its final recommendations to the Executive Committee, which discusses the recommendations and makes a final decision at its September meeting," it said.

Substance abuse is an important issue related to youth health worldwide. In NFHS-3, data were collected on tobacco consumption and alcohol consumption by women and men. Annually, about 5 million people die worldwide due to tobacco-related diseases, which are more than deaths caused by any other single agent (Global Tobacco Surveillance, 2007). According to Mishra et al. (2005), if the current consumption of tobacco trends persists, tobacco related deaths will be around 10 million per year by 2030. While cigarettes are the dominant form of tobacco use in much of the world, oral use of smokeless tobacco (chewing or applying to the teeth or gums) and smoking of *bidis* are the dominant forms of tobacco consumption in India.

Adolescents

The transitional stage of development between childhood and adulthood represents the periods of time during which a person experiences a variety of biological changes and encounters a number of emotional issues. The ages which are considered to be part of adolescence vary by culture, and ranges from preteens to 19 years. According to the World Health Organization (WHO), adolescence covers the period of life between 10 and 20 years of age. Adolescence is often divided by psychologists into three distinct phases: early, mid, and late adolescence. The United Nations, for statistical purposes, defines 'youth', as those persons between the ages of 15 and 24 years, without prejudice to other definitions by Member States.

Slum

Slum is a place where unhygienic conditions prevail, illiteracy high, migrants, hutments and a dwelling place of the people belonging to the low social – economic group.

Addiction

Adolescents having the "uncontrollable compulsive drug seeking and use, even in the face of negative health and social consequences.

Substance Abuse

Substance Abuse, also known as drug abuse, refers to a maladaptive pattern of use of a substance that is not considered dependent. The term "drug abuse" does not exclude dependency, but is otherwise used in a similar manner in non medical contexts. The terms have a huge range of definition related to taking a psychoactive drug or performance enhancing drug for a non-therapeutic or non-

medical effect. All of these definitions imply a negative judgment of the drugs most often associated with this term include alcohol, amphetamines, barbiturates, benzodiazepines, cocaine, methaqualone, and opioids.

Kumar, Ravindra, (2006) highlights his study in assessing the knowledge and attitude of students towards the effect of alcohol conducted in Bangalore by simple random sampling through semi structured questionnaire. Findings of the study showed that, participants knowledge about effect of alcohol is inadequate (33.2%), although the participants overall attitude towards effect of alcohol is found to be favourable (77.7%). So enhancement in knowledge about alcoholism aspect is very much required. Selvaraj, (2007) "Study on Alcoholism among Students" was a descriptive study conducted on alcoholism among college students in Salem, India with purposive sampling technique and data collection through structured questionnaire shows that students had only moderate awareness on alcoholism (68%) of total samples. So the result of the study reveals that students were moderately aware of the problems related to alcoholism.

Lisa Sarangi (2008) Study on Substance Abuse among Adolescents in Urban Slums of Sambalpur shows that significantly higher level of adolescents using drugs had an addicted peer group. The majority of substance abusers either never went to school (54.4%) or was school drop-outs (51.7%). The most common place for initiation of substance abuse was recreational avenues for males (49.7%) and home (36.6%) for females. A majority of the adolescents i.e., 150 (69.8%) purchase substances from their own pocket money. According to National Institute on Drug Abuse report, (2010) emphasis on school based prevention program for high school students with poor school achievement and a potential for not completing their education. Participants may also show signs of multiple problem behaviours, such as substance abuse, depression, aggression, or suicidal behaviours. Students are screened for eligibility and then invited to participate in the program. The main aim of the program was to reduce drug use, Skills to manage mood and emotions. The program influences positive peer bonding, skills training.

Rukmani Jayaraman and V. Thirumagal (2011) highlight the therapists that rehabilitating addicts and the family members of such addicts. While the term used in the title is 'alcoholism', it will serve equally efficiently in dealing with other addicts as well. The introduction tells you why the focus is on the family and spells out clearly the issues that are covered in the book. Written in a simple, straight-forward style, the language can be understood by anyone with a professional background.

Karthika Sethu & F.X. Lovelina Little Flower's (2014) study on "Substance Abuse among Adolescents" shows that 66.7% respondents are aged between 14 & 16 years. The results of the study also highlights that 63.3% respondents started abuse with tobacco, 80% respondents are cigarette smokers and 50% respondents have drug abusing friends.

Sathish Kumar & Sathyamurthi (2018) the study was carried out in two areas (one urban slum chetpet and one Village Vengal) and finds that adolescents of the study areas are very much vulnerable to substance usage due to high availability of substance and varied influences and exposure to substance. It describes the physical, psychological and social issue comparison of the prevalence and consequences of substance use disorder among adolescents of an urban slum and a village.

Sathyamurthi et al (2020) study is to know the usage and it's on individual, family and community at large and to suggest an appropriate social work intervention method for the adolescents to cope up their dependency on substance. More than one third (72 per cent) of the respondents have not shown any proof of age while buying cigarettes, One third (38 per cent) of the respondents use both chew and snuff types of tobacco, More than one third (72 per cent) of the respondents have a habit of consuming alcohol, One third (38 per cent) of the respondents started consuming alcohol at the age of 15 years, two third (66 per cent) of the respondents have not tried marijuana, Majority (86 per cent) of the respondents have not tried Cocaine, Majority (74 per cent) of the respondents have not sniffed glue or spray cans, Vast Majority (94 percent) of the respondents have not used steroids.

METHODOLOGY

In this part, researcher highlighted the objectives of the study, field of study, pilot study, research design, Sampling design, tools for data collection, sources of data, pre-testing, actual data collection, definition of terms, analysis design of the study and limitations. An extensive review of the literature and theoretical foundations made by the researcher gave an indepth insight into the research gaps in the area of slum, adolescents and substance abuse. Keeping this in mind, researcher has formulated the following objectives. The key words used in the objectives have been briefly explained earlier in this chapter. Objectives are to study the demographic profile, family background, reasons, forms and consequence of substance abuse by the slum adolescents. Based on the study and findings appropriate social work intervention model will be suggested by the researcher. The research study focuses the Neighbourhood Community of Chennai city, which is the capital city of the Tamil Nadu State. Besides being an important district, the city is one of the metropolis of India and serves as the gateway of the culture of South India.

The research design of this study is descriptive in nature. Researcher attempts to describe the substance abuse among the slum youth and later on ventures into study and explain the relationships among the variables. All the Neighbourhood Community under the municipal Corporation of Chennai city forms the universe of the study. There are 1247 Neighbourhood Community in the ten corporation zones in Chennai city. In Central city 302 Neighbourhood Community, industrial 272 Neighbourhood Community and 673 Neighbourhood Community in residential areas respectively as per the Corporation of Chennai.

The disproportionate stratified random sampling was used to select sample from the above three type of Neighbourhood Community. Twenty adolescents were interviewed at random among six Neighbourhood Community, i.e., two each Neighbourhood Community

from the slum types. Which constitutes a total of one hundred and twenty samples by using the inclusion criteria of WHO adolescence covers the age group between 10 to 20 years. The researcher administered the interview schedule to obtain information from the slum adolescents. Interview schedule consists of demographic profile, family details, reasons, forms of substance abuse by the respondents and the relationship with various groups were included in the tool based on the objectives of the study.

DATA ANALYSIS AND INTERPRETATION

Researcher analyzed the primary data as per the objectives of the study and it is depicted in descriptive analysis and appropriate tests have been used to test the stated hypothesis.

Table No. 1 Level of Education

S.No	Education	Frequency	Percent
1	Primary	8	4.4
2	Secondary	24	13.3
3	High School	101	56.1
4	Higher Secondary	45	25.0
5	Graduate	1	.6
6	Illiterate	1	.6
Total		180	100

The above table shows the educational level of the slum adolescents those who abuse the substance in the residential, central city and business slum types. More than half (56.1%) of the adolescents completed high school education, one fourth (25%) of them studied higher secondary level of education, below one sixth (13.3%) of the respondents only secondary level and below five per cent of them completed primary and negligible per cent were in two extremes viz illiterate and graduates.

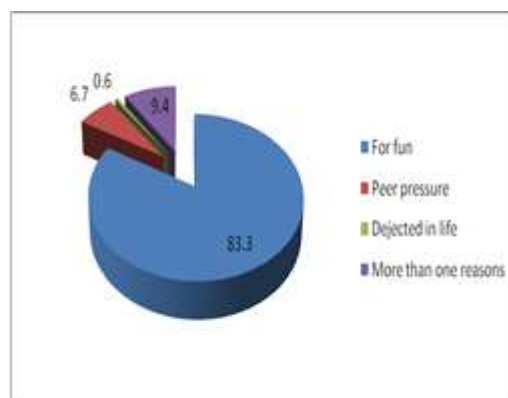


Figure No. 1 Reasons for Substance abuse by the Adolescents

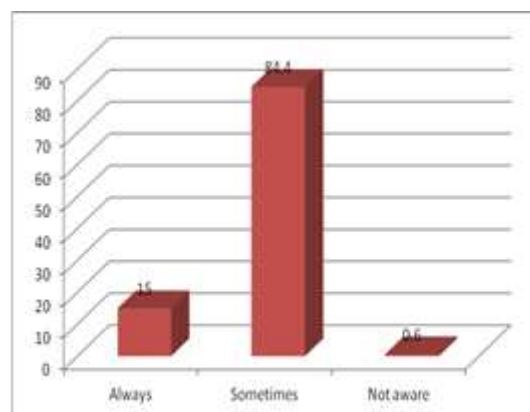


Figure No. 2 Frequency of Parents Scolding their abuses

Slum adolescents abuses the substance for petty reasons, due to their psychological imbalance, the instability, peer pressure, family disorganisation, influence of media, availability of substance etc. are the major reasons and from the study participants it is also found that majority of their parents warned and scolded their wards sometimes, almost one sixth of them always and surprisingly only very few of them not aware of the abuses.

Table No. 2 Age wise Substance Abuse of Adolescent

		Frequency of Substance Usage			Total
		2	4	5	
Age in \years	10 to 13	2 (1.1)	6 (3.3)	1 (0.6)	9 (5)
	14 to 17	18 (10)	30 (16.7)	1 (0.6)	49 (27.2)
	18 to 20	34 (18.9)	87 (48.3)	1 (0.6)	122 (67.8)
Total		54 (30.0)	123 (68.3)	3 (1.7)	180 (100)

From the above table, it shows that the age wise distribution of substance abuse of the adolescents in Chennai Neighbourhood Community. Among the majority (68%) of the adolescents between the age group of 18 to 20 years were distributed as nearly half of them abuse four times, below one fifth of them abuse two times and negligible per cent of the adolescent abuse more than five times in a month. Among more than one fourth (27.2%) of them between 14 to 17 years of age were distributed as a little above one sixth (16.7%) per cent abuse four times, one tenth abuse 2 times and negligible per cent of the adolescent abuse more than 5 times in a month and only five per cent of the adolescent age group between 10 to 13 years also distributed in the same manner.

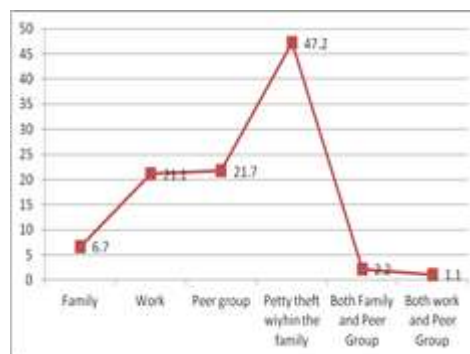


Figure No. 4 Frequency of problems due to Substance use

Table No. 4 Type of Substance Abused by the Family members

S. No	Substance Abuse	Frequency	Percent
1	Alcohol	93	51.7
2	Both Tobacco & Alcohol	12	6.7
3	Others	75	41.7
Total		180	100

The table shows, which substance is abused by the respondents family members. More than half percent (51.7) of the respondents family members use alcohol for substance abuse, more than one third percent (41.7) of the respondent's family members are not abusing any drugs for substance abuse and negligible percent (6.7) of the respondent's family members use both tobacco & alcohol for substance abuse.

Figure No. 3 Economic Sources for Users

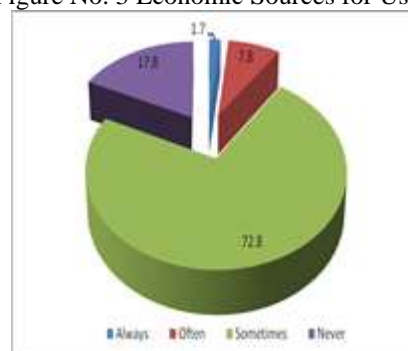


Table No. 5 Opinion about Relapse by the Slum Adolescents

S. No	Habit relapse	Frequency	Percent
1	Yes	162	90
2	No	18	10
Total		180	100

The above table shows the respondents habit replace ever after successfully quitting the habit. More than two third percent (90) of the respondents have relapsed substance abuse even after successfully quitting the habit and negligible percent (10) of the respondents have not relapsed the substance abuse after successfully quitting it.

MAJOR FINDINGS AND SUGGESTIONS

The main findings of the research study are the following:

- More than four fifth percent (83.30) of the respondents are using substance abuse for fun.
- More than four fifth percent (98.30) of the respondents are using cigarette for substance abuse.
- Three fifth percent (60) of the respondents are using Pan for substance abuse.
- More than four fifth percent (98.30) of the respondents are using Alcohol for substance abuse.
- More than half a percent (58.30) of the respondents abusing drugs 4 times a week.
- More than four fifth percent (98.30) of the respondents are abusing more than one drug at a time.
- More than four fifth percent (83.30) of the respondents feel energetic sometimes during substance abuse.
- More than four fifth percent (86.70) of the respondents drink, when they hangout with their friends.
- More than half a percent (56.70) of the respondents get into fight during their substance abuse.
- More than four fifth percent (96.70) of the respondents have altered their drinking by switching from one form drink to another.
- More than four fifth percent (90.00) of the respondents have experienced blackouts as a result of substance abuse.
- More than four fifth percent (95.00) of the respondents use drugs with friends of their own age.
- More than half a percent (56.70) of the respondents have problem with their father due to substance abuse.
- More than halves a percent (58.30) of the respondent's family members are also abusing substance.
- More than half a percent (51.70) of the respondent's family members is abusing alcohol.
- More than one third percent (35.00) of the respondents get money for substance abuse through petty theft with in family.
- More than two third percent (67.30) of the respondents spend Rs.1000/week for substance abuse.
- More than two third percent (75.00) of the respondents can control themselves from substance abuse, but their friends can easily influence them.
- More than three fifth percent (63.30) of the respondents using substance abuse are involved in bunking classes.
- Full percent (100) of the respondents know the adverse consequence of substance abuse.
- More than four fifth percent (82.00) of the respondents can't quit due to peer pleasure.
- More than four fifth percent (90.00) of the respondents have relapsed their habit, even after successfully quitting it.
- More than four fifth percent (81.70) of the respondents are not interested in involving in any treatment program on substance abuse.

SUGGESTIONS AND CONCLUSION

Parents have to self-groom their children by checking with their school on child's behaviour and academic performance. Schools have to give awareness program on substance abuse and its health issues to the adolescents. Mind and health development oriented activities have to be carried out among the adolescents. In the socialising process the adolescents have to be imparted the importance of education and the role of family should be given more thrust. Since the researcher focused only the two Neighbourhood Community, further research may be conducted in comparing other Neighbourhood Community in Chennai. Both rural and urban Neighbourhood Community may be compared in the future research.

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