



SJMS 2022

THE SOCIAL IMPACT OF DRUG ABUSE

Poritosh Das

**Research Scholar
Assam University, India**

Abstract: Drug addiction is composed of two words drug and addiction, which is injurious threatening to the life of the user and to the society at huge. The difficult of matter has become a global public health concern and it is one of the top problems challenging the country today particularly among the youths. This paper mainly explore the causes, effects and control of this menace and also wants to highlight the social and cultural sides of drug abuse.

Abstract: Drug addiction, social and cultural aspects, public awareness, Rehabilitation

INTRODUCTION

Drug addiction is measured as the most serious problem for eras. Mainly, opium, heroin and cocaine were used for many kinds of medicinal purposes until people use them for fulfilling their physical desires. As a effect, the number of habit is increasing day by day creating so many other difficulties. Prior, people try to hide their problems but now with the development in the medical services and improved public awareness, modern drug treatment can be availed very simply. Similarly, these treatments are accessible to all without charging too high. As the addiction disease makes a victim obsessive and compulsive, many physicians and experts have classified it as a disease which is irredeemable, progressive and will lead to institutionalized or death if no actions have been taken for the retrieval. At that stage, addicts find themselves totally powerless and unsuccessful to stop their movements and get back to their regular way of life. This act of theirs will not disturb them but families are totally devastated by the constant use of drugs.

METHODOLOGY

The study was conducted on RE-LIFE FOUNDATION DE-ADDICTION & REHABILITATION CENTRE. It is a Therapeutic community for drug addicts & Alcoholics, REGD NO. 3115 under the

act – 1882. RE-LIFE FOUNDATION was established in 15 OCTOBER,2021 and it is situated in Sarumotoria, Sapta Sahid Path, Gmc Taluk of Kamrup district in Guwahati city. And the founder is Richie Baruah. The study is based on both primary and secondary sources. Secondary data collected from books, journal, government and non government report etc. primary data collected from Re-Life Foundation De-Addiction & Rehabilitation Centre. Tools of data are interview schedule, case study, observation. Total sample was 15 respondents. The sample was selected by total sampling method.

DISCUSSION AND MAJOR FINDINGS

Age Group of the respondent: The age group of the respondent is shown in following table.

Table No.1

Age Group

<i>AGE GROUP</i>	<i>FREQUENCY</i>	<i>PERCENTAGE</i>
<i>10 Years – 20 Years</i>	<i>2</i>	<i>13%</i>
<i>21 Years – 30 Years</i>	<i>6</i>	<i>40%</i>
<i>31 Years – 40 Years</i>	<i>4</i>	<i>27%</i>
<i>41 Years – 50 Years</i>	<i>1</i>	<i>7%</i>
<i>Above 50 Years</i>	<i>2</i>	<i>13%</i>
<i>TOTAL</i>	<i>15</i>	<i>100%</i>

According to the data findings it shows that both adults and teenagers are recovering addicts and age range start from 10years to 50years and above. And mostly from 21years to 30years are the maximum recovering addicts.

Sex category: All the respondent of the study area are male respondent.

Level of Education: The education qualification of the respondent is shown in following table.

TABLE NO.2

EDUCATION QUALIFICATION

<i>EDUCATION QUALIFICATION</i>	<i>FREQUENCY</i>	<i>PERCENTAGE</i>
<i>MATRIC</i>	5	33%
<i>HIGHER SECONDARY</i>	4	27%
<i>GRADUATE</i>	6	40%
<i>POST GRADUATE</i>	0	0%
<i>TOTAL</i>	15	100%

All the respondents are literate and maximum are graduate.

Father Occupation of the respondent: The father occupation of the respondent is shown in following table.

TABLE NO. 3

FATHER OCCUPATION

<i>FATHER'S OCCUPATION</i>	<i>FREQUENCY</i>	<i>PERCENTAGE</i>
<i>GOVT. JOB</i>	6	40%
<i>PRIVATE</i>	1	7%

<i>BUSSINESS</i>	8	53%
<i>TOTAL</i>	15	100%

The above table shows the frequency and percentage of father's occupation of all the respondents, where 40% of them are in the Government sector; 7% in private sector; and 53% i.e., a majority are into business.

Mother Occupation of the respondent: The mother occupation of the respondent is shown in the following table.

TABLE NO. 4

MOTHER'S OCCUPATION

<i>MOTHER'S OCCUPATION</i>	<i>FREQUENCY</i>	<i>PERCENTAGE</i>
<i>GOVERNMENT JOB</i>	1	7%
<i>PRIVATE JOB</i>	1	7%
<i>HOUSEWIFE</i>	13	86%
<i>TOTAL</i>	15	100%

The above table shows the frequency and percentage of mother's occupation of all the respondents, where 7% are in the government sector; 7% are in the private sector; and 86% are housewives.

Monthly Income of the family of the respondent: The Family Income of the family of the respondent is shown in following table.

TABLE NO.5

MONTHLY INCOME OF THE FAMILY

<i>INCOME</i>	<i>FREQUENCY</i>	<i>PERCENTAGE</i>
10000-20000	7	47%
21000-40000	4	27%
41000-60000	3	20%
61000 and Above	1	6%
TOTAL	15	100%

The above table shows the frequency and percentage of family's monthly income, where 47% earn around 10000-20000; 27% earn around 21000-40000; 20% earn around 41000-60000; and 6% earn around 61000 and above.

Age of drug consumption of the respondent: The age of drug consumption of the respondent is shown in following table.

TABLE NO.6

AGE OF DRUG CONSUMPTION FOR THE FIRST TIME

<i>AGE GROUP</i>	<i>FREQUENCY</i>	<i>PERCENTAGE</i>
10 Years-15 Years	3	20%
16 Years-20 Years	5	33.3%
21 Years-25 Years	5	33.3%
26 Years and above	2	13.3%

TOTAL	15	100%
--------------	-----------	-------------

According to the data findings most of the respondents started consuming drugs since their mid-teens to mid-twenties i.e. from 15years to 26years.

Reason for using drugs of the respondent: The reason for using drugs of the respondent is shown in following table.

TABLE NO.7

REASON FOR USING DRUGS

REASON	FREQUENCY	PERCENTAGE
FAMILY PROBLEM	4	27%
DEPRESSION	7	47%
ANXIETY	2	13%
LOW COST OF DRUGS	2	13%
TOTAL	15	100%

Among the total respondents maximum started consuming drugs because of depression, anxiety, Low-cost of drugs and some of them because of family problem.

Roots of drug uses of the respondent: The roots of drug uses of the respondent is shown in following table.

TABLE NO.8

ROOTS OF DRUG USES

<i>ROOTS</i>	<i>FREQUENCY</i>	<i>PERCENTAGE</i>
<i>SNIFF (via nose)</i>	0	0%
<i>SMOKE</i>	1	7%
<i>ORAL</i>	2	13%
<i>INJECTION</i>	12	80%
<i>OTHER</i>	0	0%
<i>TOTAL</i>	15	100%

The data shows that injection is the most drug uses, among 15 respondents 12 of them had used injection and followed by oral which is 2 of them and smoking 1.

Source about drugs of the respondent: The source about drugs of the respondent is shown in the following table.

TABLE NO.9

SOURCE ABOUT DRUGS

<i>SOURCES</i>	<i>FREQUENCY</i>	<i>PERCENTAGE</i>
<i>MYSELF</i>	1	7%
<i>FRIENDS</i>	11	73%
<i>INTERNET</i>	0	0%

<i>MEDIA</i>	3	20%
<i>OTHER</i>	0	0%
<i>TOTAL</i>	15	100%

According to the data findings most of them gain knowledge about drugs from friends and followed by media and 1 by himself.

Problems of the respondent after using drugs: The problems of the respondent after using drugs is shown in following table.

TABLE NO.10

PROBLEMS AFTER USING DRUGS

<i>PROBLEMS</i>	<i>FREQUENCY</i>	<i>PERCENTAGE</i>
<i>MEMORY LOSS</i>	1	7%
<i>AGGRESSION</i>	6	40%
<i>DEPRESSION</i>	6	40%
<i>ANXIETY</i>	2	13%
<i>OTHER</i>	0	0%
<i>TOTAL</i>	15	100%

According to all the respondents they have faced problems after using drugs i.e. aggression, depression, anxiety and memory loss.

TABLE NO.11

HOW CAN DRUGS AFFECT YOU AND YOUR FAMILY

<i>AFFECTS</i>	<i>FREQUENCY</i>	<i>PERCENTAGE</i>
<i>EMOTIONAL</i>	8	53.3%
<i>PSYCHOLOGICAL</i>	2	13.3%
<i>FINANCIAL</i>	3	20%
<i>SOCIAL</i>	2	13.3%
<i>OTHER</i>	0	0%
<i>TOTAL</i>	15	100%

According to all the respondents it has been affected their family psychologically, emotionally, financially and socially.

Challenges Experienced by the respondent during Recovery: Challenges experienced by the respondent during recovery is shown in following table.

TABLE NO.12

CHALLENGES EXPERIENCED DURING RECOVERY

<i>CHALLENGES</i>	<i>FREQUENCY</i>	<i>PERCENTAGE</i>
<i>CRAVINGS</i>	8	54%
<i>MONEY PROBLEMS</i>	5	33%

<i>MENTAL HEALTH ISSUES</i>	<i>0</i>	<i>0%</i>
<i>LONELINESS</i>	<i>2</i>	<i>13%</i>
<i>OTHER</i>	<i>0</i>	<i>0%</i>
<i>TOTAL</i>	<i>15</i>	<i>100%</i>

According to the data findings the respondents had to face many challenges during their recovery like cravings, money problems and had to deal with loneliness.

TABLE NO.13

DO YOU FEEL CONFIDENT NOT TO DO DRUGS AGAIN?

	<i>FREQUENCY</i>	<i>PERCENTAGE</i>
<i>YES</i>	<i>8</i>	<i>53%</i>
<i>NO</i>	<i>7</i>	<i>47%</i>
<i>TOTAL</i>	<i>15</i>	<i>100%</i>

Among the respondents half of them are confident enough not to take drugs again and those are the recovering addicts who are recovering more than 9 months or a year but half of them are still not yet confident enough not to take drugs again, those are the recovering addicts who are recovering less than 6 months.

MAJOR FINDINGS

This is the summary of findings from each and individual set and findings of both primary and secondary data sets are brought in together in this content.

- According to the data findings the addicts age of range start from 10 – 50years and above and mostly from 21 - 30 years are the maximum recovering addicts.
- Sex category of all the respondents are male.
- All the respondents are literate and come from a well to do family.
- And most of the respondents started consuming drugs since their mid-teens to mid-twenties i.e. from 15- 26 years.
- Among the total respondents maximum started consuming drugs because of depression, anxiety, low-cost of drugs and some of them because of family problem.
- The data shows that injection is the most drug uses, among 15 respondents 12 of them had use injection and followed by oral which is 2 of them and smoking 1.
- And mostly they gain knowledge about drugs through friend circle.
- According to all the respondents they have been facing problems after using drugs i.e. aggression, depression, anxiety and memory loss.
- They had to face many challenges during their recovery like cravings, money problems and had to deal with loneliness.
- And it have been affected their family through psychologically, emotionally, financially and socially.
- And among all the respondents some are recovered and confident enough not to take drugs again whereas some of them are still recovering and not much confident enough not to take drugs again.

CONCLUSION

As to conclude drug addiction has become a major reason of concern all over the world as it can be seen disturbing all age group of people and overcoming addiction is a complex process. Several teens have tough time selling with sadness or other stresses common during adolescence. It was truly a painful experience after interacting with them. When the respondents started to open up to interact about their

problems, we come to know that each of the respondents have expressions many problems and challenges during their recovery. Besides it have also affected their families in various sides. Some have improved and confident enough not to take drugs again and some are recovering. So to bring their regular life, we as a student must do counselling for them instead of consecutively away or evading them. Also police should take act not only against these dependence masses but also against the peddlers who are main source of the distribution of drugs among the mass of the city. If the sale will be barred severely all over the state or city, then slowly the ingesting will also stop.

REFERENCES

- [1] Basu, D., Aggarwal, M., Das, P. P., Mattoo, S. K., Kulhara, P., & Varma, V. K. (2012). Changing pattern of substance abuse in patients attending a de-addiction centre in north India (1978-2008). *The Indian journal of medical research*, 135(6), 830.
- [2] Becker, J. B., & Hu, M. (2008). Sex differences in drug abuse. *Frontiers in neuroendocrinology*, 29(1), 36-47.
- [3] Bhalla, A., Dutta, S., & Chakrabarti, A. (2006). A profile of substance abusers using the emergency services in a tertiary care hospital in Sikkim. *Indian journal of psychiatry*, 48(4), 243.
- [4] Botvin, G. J. (2000). Preventing drug abuse in schools: Social and competence enhancement approaches targeting individual-level etiologic factors. *Addictive behaviors*, 25(6), 887-897.
- [5] Chakraborty, K., Neogi, R., & Basu, D. (2011). Club drugs: review of the 'rave' with a note of concern for the Indian scenario. *The Indian journal of medical research*, 133(6), 594.
- [6] Chavan, B. S., Arun, P., Bhargava, R., & Singh, G. P. (2007). Prevalence of alcohol and drug dependence in rural and slum population of Chandigarh: A community survey. *Indian journal of Psychiatry*, 49(1), 44.
- [7] Ghulam, R., Rahman, I., Naqvi, S., & Gupta, S. R. (1996). An epidemiological study of drug abuse in urban population of Madhya Pradesh. *Indian journal of psychiatry*, 38(3), 160.

- [8] Guerrero, E. G., Villatoro, J. A., Kong, Y., Fleiz, C., Vega, W. A., Strathdee, S. A., & Medina-Mora, M. E. (2014). Barriers to accessing substance abuse treatment in Mexico: national comparative analysis by migration status. *Substance abuse treatment, prevention, and policy*, 9(1), 30.
- [9] Hazarika, N. C., Biswas, D., Phukan, R. K., Hazarika, D., & Mahanta, J. (2000). Prevalence and pattern of substance abuse at Bandardewa, a border area of Assam and Arunachal Pradesh. *Indian journal of psychiatry*, 42(3), 262.
- [10] Jena, R., Shukla, T. R., & Pal, H. (1996). Drug use in a rural community in Bihar: Some psychosocial correlates. *Indian journal of Psychiatry*, 38(1), 43.
- [11] Jha, P., Jacob, B., Gajalakshmi, V., Gupta, P. C., Dhingra, N., Kumar, R., ... & Boreham, J. (2008). A nationally representative case-control study of smoking and death in India. *New England Journal of Medicine*, 358(11), 1137-1147.