



International Journal of Advanced Community Medicine

E-ISSN: 2616-3594
P-ISSN: 2616-3586
IJACM 2019; 2(3): 07-11
Received: 06-07-2019
Accepted: 10-08-2019

Dr. Shivesh Devgan
Assistant Professor,
Department of Community
Medicine Sri Guru Ram Das
Institute of Medical Sciences &
Research, Amritsar, Punjab,
India

Dr. Harjot Singh
Assistant Professor,
Department of Community
Medicine, Sri Guru Ram Das
Institute of Medical Sciences &
Research, Amritsar, Punjab,
India

Dr. Amrit Pal Singh Brar
Assistant Professor,
Department of Community
Medicine Sri Guru Ram Das
Institute of Medical Sciences &
Research, Amritsar, Punjab,
India

Correspondence

Dr. Shivesh Devgan
Assistant Professor,
Department of Community
Medicine Sri Guru Ram Das
Institute of Medical Sciences &
Research, Amritsar, Punjab,
India

A study to assess various factors that encouraged substance indulgence amongst substance abusers in urban slums of Amritsar city

Dr. Shivesh Devgan, Dr. Harjot Singh and Dr. Amrit Pal Singh Brar

DOI: <https://doi.org/10.33545/comed.2019.v2.i3a.75>

Abstract

Background: The drug problem has developed some key characteristics over the last few decades, against a backdrop of rapid socioeconomic transitions in various countries. Illicit drug use is now characterized by a concentration among youth, notably young males living in urban environments, along with expanding range of psychoactive substances.

Materials & Methods: The proposed study was carried out in slum population of Amritsar city. A total of 64 slum areas were divided into 4 sectors depending upon their location and then from each sector, one area was selected randomly by lottery method, and from each area, 400 houses were surveyed by systematic random method. So in total 1600 households were surveyed for this study.

Results: Out of the total 1273 respondents, majority i.e. 615 (48.31%) responded enjoyment as the main reason for starting drugs, while 465 (36.52%) cited curiosity as the reason for indulgence into substance abuse. Friends (peer pressure) were the primary reason i.e. 806 (63.31%) for motivating towards drugs. Out of 828 respondents, who made attempt to quit drugs, majority i.e. 431 (52.05%) faced relapse because of easy availability of drug.

Conclusion: The unjust treatment of youth and other minority subcultures is a major social problem, breeding crime, hypocrisy, anarchy and driving thousands away from meaningful participation in society. For both sides in this conflict between generations, drugs have taken on harmful symbolic importance.

Keywords: Substance abuse, urban slums, provoke, behavior change

Introduction

The drug problem has developed some key characteristics over the last few decades, against a backdrop of rapid socioeconomic transitions in various countries. Illicit drug use is now characterized by a concentration among youth, notably young males living in urban environments, along with expanding range of psychoactive substances. Although established illicit drug markets in many developed countries have shown signs of stabilization, the growth of drug use seems to continue in many developing countries, more so in slum dwellers. The existence of drug menace can be observed through the interaction of Agent, Host and Environmental factors, where Agent being the drugs, source of drug and government policies. Host is the individual or one's personality, psychosocial behavior and genetic makeup. Family, friends, money, stress, unemployment etc. come under environmental factors. Simultaneous presence of all these factors, increase the vulnerability of the community towards drug indulgence ^[1]. Various factors are accountable for people resorting to substance dependence, to relieve pain, get relief from stress, enhance energy, to escape reality, to feel more self-esteem or for recreational purposes. Early adolescent, predominantly males, are motivated towards drugs for social cohesion, enhancing positive feeling and creativity, for thrills or heightened social status. The likelihood of their indulgence in drugs increases during the time of disruptive transition, for example, moves to a new community, higher secondary school to college. Whether or not part of any particular subset of youth culture, young people like to be exclusive, own something that is personal to themselves and consciously or subconsciously drug use may act as a means of defiance to provoke adults into a reaction.

Materials and Methods

A cross-sectional study conducted among substance abusers in urban slums of Amritsar city,

recognized 64 slum areas according to Draft master plan 2011-2031 by Puda Mohali. These 64 areas were divided into 4 sectors depending upon their location and then from each sector one area was selected randomly by lottery method. After the selection of areas by random method, 400 houses were surveyed by systematic random method from each area. Out of total 1600 households surveyed for this study, 1273 respondents were found to be substance abusers. Total 1273 respondents were interviewed using a pre-designed and pre-tested proforma. Any member of the family consuming drugs was enlisted for the questionnaire. Ethical clearance was taken from the ethical committee of the institution. The purpose of study was explained and written consent was taken from the respondent and if minor, then from the parents of the drug abuser, or any other responsible member of family. The data thus collected was compiled and analyzed statistically and valid conclusions were drawn. The data collected was analyzed using Epi-Info software version 3.5.4. Descriptive statistics were presented in frequency and percentage. The chi-square test was used to establish relation where ever applicable.

Results and Discussions

Table 1 depicts, amongst 1273 substance abusers, 860 (67.55%) were from nuclear families and rest 413 (32.44%) were from joint families. 1256 (98.66%) were males while only 17 (1.33%) were females who abused any form of substance. Majority were married i.e. 878 (68.97%), 372 (29.22%) were unmarried, while 20 (1.57%) were divorcee and 3 (0.23%) were widower. Predominantly i.e. 1169 (91.83%) belonged to upper lower class according to modified Kuppuswamy scale of socio-economic status, 66 (5.18%) belonged to lower middle class and 38 (2.98%) belonged to lower class.

Table 2 shows that amongst the 1273 respondents, 487 (38.26%) consumed alcohol only, while 353 (27.72%) exclusively consumed tobacco. In drug combination majority i.e. 338 (26.55%) consumed alcohol with tobacco, while 42 (3.29%) combined alcohol with opiates. Other combinations were availed by 34 (2.67%) respondents.

Table 3 shows that out of the total 1273 respondents, majority i.e. 615 (48.31%) responded enjoyment as the main reason for starting drugs, while 465 (36.52%) cited curiosity as the reason for indulgence into substance abuse. 246 (19.32%) of them initiated to relieve stress while 123 (9.66%) took in order to cope depression, 62 each (4.87%) wanted to become sociable or improve their work performance. 93 (7.3%) blamed their home environment for starting substance abuse. Jain *et al.* found Curiosity (68%) as the main reason amongst respondents indulged in narcotics in resettlement areas of Delhi [2], whereas Bansal *et al.* found the most common purpose of substance abuse to be curiosity or experimentation (34.3%) among child laborers from slums in Surat [3].

Friends (peer pressure) were the primary reason i.e. 806 (63.31%) for motivating towards drugs whereas family member, in case of 398 subjects (31.26%) provoked to initiate substance abuse. Kokiwar P and Jogdand GR, Sarangi L *et al.*, Kumar C and Prabhu GR observed peer pressure to be 52.9% [5], 70% [4] and 84% [6], being the leading reason for initiation of substance use amongst youth of their respective slum regions. Adolescence is an age where the major impact on their personality is through their friends. Hence this age group succumbs to the peer pressure

for trying out new experiences in which substance abuse is a prominent one.

Out of 1273 respondents consuming any form of drug, majority i.e. 977 (76.74%) worked at daily wages in order to seek money for buying drugs, 46 (3.61%) borrowed money from their relatives or friends, whereas 19 (1.5%) got pocket money from parents, whereas 182 (14.29%) were employed and only 7 (0.55%) resort to stealing in order to procure drug, while the remaining 72 (5.65%) generated source of income through varied means. A survey on street children observed that 45.5% said that they earned money themselves, 42.5% said that they were given money by family or borrowed from them, 32.6% reported taking money from family by lying to them, 22.3% borrowing from friends, 14.0% reported stealing from home or selling household items, 7.9% reported stealing from outside, 6.9% reported begging, 2.8% reported snatching from others and 5.9% reported helping sell articles stolen by others [7].

Table 4 shows that out of 911 respondents, majority felt better or calm i.e. 657 (72.11%) after consuming alcohol, 173 (18.99%) felt excited after alcohol consumption, 149 (16.35%) experienced sense of dissociation whereas 40 (4.39%) felt drowsy after drinking alcohol. Out of 52 respondent addicted to opioid derivatives, majority i.e. 38 (80.85%) felt sense of dissociation on taking opiates, 14 (29.78%) felt drowsiness whereas 12 (25.53%) felt calm on intake of opiates. Amongst 708 respondents consuming tobacco, 511 respondents (72.17%) experienced relaxation (calm), whereas 241 (34.03%) felt better after tobacco intake. Out of 16 respondents indulged in cannabis, 8 (50%) experienced sense of dissociation, 7 (43.75%) felt calm, whereas 6 (37.5%) of them felt better and remaining 6 (37.5%) experienced drowsiness on cannabis intake. Amongst 13 respondents dependent on sedatives, majority i.e. 12 (92.3%) felt sense of dissociation after sedative intake and 9 (69.23%) amongst them felt drowsiness on consumption of sedatives. Out of 18 respondents indulged in volatile solvents intake, 12 (66.6%) each felt calm or drowsy after consuming volatile solvents.

The feelings of calmness was more apparent amongst tobacco and alcohol consumers as compared to opiates and volatile solvents and the difference was found to be statistically highly significant (Chi square = 468.9, $p < 0.001$) while sense of dissociation was prominent amongst sedatives and opiates abusers in comparison to others and the difference was found to be statistically highly significant (Chi square=139.5, $p < 0.001$). In a study by Raj RS *et al.*, more than half of the respondents (70%) involved in drinking were not because of any worries or any family problems but just to have pleasure from it [8].

Table 5 shows that out of 911 respondents consuming alcohol 392 (43.02%) experienced restlessness on non-availability of alcohol, 213 (23.38%) felt angry, 98 (10.75%) developed craving and 206 (22.61%) felt sense of emptiness on not consuming alcohol. Remaining 74 (8.12%) felt agitated or violent on unavailability of alcohol. Amongst 708 respondents, 282 (39.83%) felt agitated on non-availability of tobacco, 167 (23.58%) felt restless and 12 (1.69%) turned violent on non-availability of tobacco, whereas 315 (44.49%) did not experience any behavior change on non-consumption of tobacco. Out of 16 respondents consuming cannabis, 8 (50%) felt craving, while 7 (43.75%) felt helplessness on non-availability of cannabis. Restlessness was experienced by 5 (31.25%) of

them, while 4 (25%) felt sense of emptiness on non-availability of cannabis. Amongst 52 subjects dependent on opioid derivatives, 43 (91.48%) developed craving, 15 became agitated and 13 turned violent on non-availability of opioids. 4 (8.5%) respondents each felt angry or sense of emptiness in absence of opioids. Out of 18 respondents addicted to volatile solvents, 10 (55.5%) each experienced either restlessness or sense of emptiness on non-availability of volatile solvents. Amongst 13 respondents indulged in sedative intake, majority i.e. 10 (76.92%) felt sense of emptiness in the absence of sedative intake, whereas 4 (30.76%) amongst them felt restlessness and remaining 4 (30.76%) developed craving on non-availability of sedatives.

Craving behavior was compared amongst alcohol and opiates and the difference was found to be statistically highly significant (Chi square=203.7, $p < 0.001$). Agitation amongst opiate addict was more as compared to than alcohol and tobacco consumers and on comparison, difference was found to be statistically highly significant (Chi square=259.3, $p < 0.001$)

Table 6 shows that out of 828 respondents, who made attempt to quit drugs, majority i.e. 431 (52.05%) faced relapse because of easy availability of drug. Out of them, 142 (17.15%) resorted back to drugs because of stress. Whereas, 116 (14.01%) respondents had peer pressure, 41 (4.95%) of them, cited sitting idle as the main reason for their drug re-indulgence. 134 (16.18%) could not withstand withdrawal effects of drugs and remaining 97 (11.71%) feared to face the reality of their lives and resorted back to drug abuse. In a survey conducted by National Commission for Protection of Child rights, significant percentage reported problem in quitting as a result of craving (49.1%), peer pressure (40.6%), easy availability (30.2%), withdrawal (19.3%) and stress (12%) amongst street children [7]. Kokiwar P, Jogdand GR observed that among 14 substance users who attempted to stop the use, 57.1% admitted that they failed to stop it, 28.6% blamed their friends, while 7.1% stated mental tension and love failure [5]. There may be different reasons of failure to stop the use but it may be due to lack of a strong support mechanism for these adolescents at the family and community level.

Table 1: Distribution of respondents on the basis of Sociodemographic profile

Sociodemographic profile (n=1273)	Parameters	No. of respondents (%age)
Type of family	Nuclear	860(67.5%)
	Joint	413(32.44%)
Gender	Male	1256(98.66%)
	Female	17(1.33%)
Marital status	Married	878(68.97%)
	Unmarried	372(29.22%)
	Widow/widower	3(0.23%)
	Divorce	20(1.57%)
Socioeconomic status	Lower	38(2.98%)
	Upper lower	1169(91.83%)
	Lower middle	66(5.18%)
	Upper middle	Nil
	Upper	Nil

Table 2: Distribution of respondents according to the use of substance as one type or in combination

Substance combination	No. of respondents	Percentage
Alcohol	487	38.26%
Tobacco	353	27.72%
Opiates	1	0.07%
Alcohol + Tobacco	338	26.55%
Alcohol + Cannabis	4	0.31%
Tobacco + Cannabis	8	0.62%
Alcohol + Opiates	42	3.29%
Alcohol + Sedatives	9	7.07%
Alcohol + Volatile solvents	18	1.41%
Alcohol + Opiates + Sedatives	4	0.31%
Alcohol + Tobacco + Cannabis	4	0.31%
Alcohol + Tobacco + Opiates	5	0.39%
Total	1273	100%

Table 3: Distribution of respondents on the basis of factors which promoted substance indulgence among substance abusers (multi response)

Reasons for starting drugs	Factors	No. of respondents	Percentage
	Enjoyment	615	48.31%
	Curiosity	465	36.52%
	Relief of stress	246	19.32%
	Depression	123	9.66%
	Chaotic home environment	93	7.3%
	Sociable	62	4.87%
	Improvement of work performance	62	4.87%
	Acceptance	29	2.27%
	Pleasure	26	2.04%

	Enhance will power	14	1.09%
Source of motivation	Family member	398	31.26%
	Friends	806	63.31%
	Drug peddler	11	0.86%
	Chemists	3	0.23%
	Other	1	0.07%
	None	63	4.94%
Source of money for buying drugs	From Parents	19	1.5%
	Borrow	46	3.61%
	Work at daily wages	977	76.74%
	Employed	182	14.29%
	Stealing	7	0.55%
	Others	72	5.65%

Table 4: Distribution of the respondents according to the behavior change when substance/drug is taken (multi response)

Behavior change when taken	Alcohol (n=911)	Tobacco (n=708)	Cannabis (n=16)	Volatile solvents (n=18)	Opiates (n=52)	Sedatives (n=13)	Total no. of responses
Feel better	481 (66.07%) [46.02%]	241 (33.1%) [32.04%]	6 (0.82%) [22.22%]	—	—	—	728
Calm	176 (24.51%) [16.84%]	511 (71.16%) [67.95%]	7 (0.97%) [25.92%]	12 (1.67%) [50%]	12 (1.67%) [17.14%]	—	718
Excited	173 (100%) [16.55%]	—	—	—	—	—	173
Drowsy	40 (49.38%) [3.82%]	—	6 (7.4%) [22.22%]	12 (14.81%) [50%]	14 (17.28%) [20%]	9 (11.11%) [42.85%]	81
Sense of dissociation	149 (71.98%) [14.25%]	—	8 (3.86%) [29.62%]	—	38 (18.35%) [54.28%]	12 (5.8%) [57.14%]	207
Others	26 (81.25%) [2.48%]	—	—	—	6 (18.75%) [8.57%]	—	32
Total no. of responses	1045	752	27	24	70	21	1939

Chi-square=468.9, $p < 0.001$ for Calm amongst Alcohol and others.Chi-square=139.5, $p < 0.001$ for Sense of dissociation amongst Opiates, Sedatives and others.**Table 5:** Distribution of the respondents according to the behavior change when substance/drug is not taken (multi response)

Behavior change when not taken	Alcohol (n=911)	Tobacco (n=708)	Cannabis (n=16)	Opiates (n=52)	Volatile solvents (n=18)	Sedatives (n=13)	Total no. of responses
Angry	213 (98.15%) [21.67%]	—	—	4 (1.84%) [5.06%]	—	—	217
Restless	392 (67.82%) [39.87%]	167 (28.89%) [21.52%]	5 (0.86%) [20.83%]	—	10 (1.73%) [50%]	4 (0.69%) [22.22%]	578
Agitated	62 (17.27%) [6.31%]	282 (78.55%) [36.34%]	—	15 (4.17%) [18.98%]	—	—	359
Violent	12 (32.43%) [1.22%]	12 (32.43%) [1.54%]	—	13 (35.13%) [16.45%]	—	—	37
Helpless	—	—	7 (100%) [29.16%]	—	—	—	7
Craving	98 (64.05%) [9.96%]	—	8 (5.22%) [33.33%]	43 (34.95%) [54.43%]	—	4 (2.61%) [22.22%]	153
Sense of emptiness	206 (88.03%) [20.95%]	—	4 (1.71%) [16.66%]	4 (1.71%) [5.06%]	10 (4.27%) [50%]	10 (4.27%) [55.55%]	234
Not any	—	315 (100%) [40.59%]	—	—	—	—	315
Total no. of responses	983	776	24	79	20	18	1900

Chi-square=203.7, $p < 0.001$ for Craving amongst Alcohol with Opiate abusers.Chi-square=259.3, $p < 0.001$ for Agitation amongst Alcohol, Tobacco with Opiate abusers.**Table 6:** Distribution of respondent according to reasons for relapse after quitting the drugs (multi-response) (n=828)

Reasons for Relapse	No. of respondents	Percentage
Withdrawal	134	16.18%
Peer pressure	116	14.01%
Easy availability	431	52.05%
Stress	142	17.15%
Unemployed	41	4.95%
Others	97	11.71%

Conclusion

Early adolescent, predominantly males, are motivated towards drugs for social cohesion, enhancing positive feeling and creativity, for thrills or heightened social status. Over dramatization and overemphasis by the media may stimulate young minds natural curiosity to experiment with drugs. The fear of withdrawal symptoms generates a self-compulsion on the addict to obtain the drug by any means.

Conflict of Interest: None

References

1. Galea S, Rudenstine S, Vlahov D. Drug use, misuse and the urban environment. *Drug Alcohol Rev.* 2005; 24:127-136.
2. Jain V, Pradhan SK *et al.* Socio-demographic profile of 15-24 years old male narcotic substance users in a resettlement colony of Delhi. *Indian J Public Health.* 2009; 53(1):44-6. [Cited on 2019 Jun 12]. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/19806830>
3. Bansal RK, Banerjee S. Substance use by child labourers. *Indian J Psychol.* 1993; 35:159-61.
4. Sarangi L, Acharya HP, Panigrahi OP. Substance abuse among adolescents in urban slums of Sambalpur. *Indian J Community Med.* 2008; 33:265-7.
5. Kokiwar PR, Jogdand GS. Prevalence of substance use among male adolescents in an urban slum area of Karimnagar district, Andhra Pradesh. *Indian J Public Health.* 2011; 55:42-5.
6. Kumar C, Prabhu GR. Prevalence of drug abuse among male youth in Tirupati, AP *Indian J Community Med.* 2006; 31:281.
7. Assessment of pattern and profile of substance use among children in India. National Commission for Protection of Child Rights. 2013; 38-50. [Cited on 2019 Jun 11]. Available from: www.ncpcr.gov.in/view_file.php?fid=17
8. Raj RS *et al.* A study on Alcoholism among youth residing in Trichirappalli slums, Tamil Nadu. *African J Science and Research*, [cited on 2019 Jun 14]. 2013; 2(2):01-07 Available from: <https://www.academia.edu/6262051/>
9. A Study on Alcoholism Among Youth Residing in Trichirappalli Slums Tamil Nadu India.