DRUG ABUSE IN INDIA

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Abstract

Drug addiction, also called substance dependence or dependence syndrome, is a condition where a person feels a strong need to take a drug. Addiction also involves other behaviours. These include finding it difficult to control the need to use the drug and feeling the use of the drug to be more important than more normal things such as family or work. When the person does not use the drug for an amount of time, they may suffer from withdrawal. When a person is addicted, they are usually addicted to a class (a specific kind) of drug. For example: Heroin is a drug that is in the Opiate class. Which means that a person addicted to Heroin may also be seen to have an addiction to other opiates such as Morphine. A person who may easily become addicted to drugs is said to have an addictive personality. The Diagnostic and Statistical Manual of Mental Disorders defines drug addiction as a mental disorder. Drug addiction is often linked with other mental disorders.

June 26 is celebrated as International Day against Drug Abuse and Illicit Trafficking every year. It is an exercise undertaken by the world community to sensitize the people in general and the youth in particular, to the menace of drugs. The picture is grim if the world statistics on the drugs scenario is taken into account. With a turnover of around \$500 billions, it is the third largest business in the world, next to petroleum and arms trade. About 190 million people all over the world consume one drug or the other. Drug addiction causes immense human distress and the illegal production and distribution of drugs have spawned crime and violence worldwide. Today, there is no part of the world that is free from the curse of drug trafficking and drug addiction. Millions of drug addicts, all over the world, are leading miserable lives, between life and death.

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India too is caught in this vicious circle of drug abuse, and the numbers of drug addicts are increasing day by day. According to a UN report, One million heroin addicts are registered in India, and unofficially there are as many as five million. What started off as casual use among a minuscule population of high-income group youth in the metro has permeated to all sections of society. Inhalation of heroin alone has given way to intravenous drug use, that too in combination with other sedatives and painkillers. This has increased the intensity of the effect, hastened the process of addiction and complicated the process of recovery. Cannabis, heroin, and Indian-produced pharmaceutical drugs are the most frequently abused drugs in India. Cannabis products, often called charas, bhang, or ganja, are abused throughout the country because it has attained some amount of religious sanctity because of its association with some Hindu deities. The International Narcotics Control Board in its 2002 report released in Vienna pointed out that in India persons addicted to opiates are shifting their drug of choice from opium to heroin. The pharmaceutical products containing narcotic drugs are also increasingly being abused. The intravenous injections of analysics like dextropropoxphene etc are also reported from many states, as it is easily available at 1/10th the cost of heroin. The codeine-based cough syrups continue to be diverted from the domestic market for abuse Drug abuse is a complex phenomenon, which has various social, cultural, biological, geographical, historical and economic aspects. The disintegration of the old joint family system, absence of parental love and care in modern families where both parents are working, decline of old religious and moral values etc lead to a rise in the number of drug addicts who take drugs to escape hard realities of life. Drug use, misuse or abuse is also primarily due to the nature of the drug abused, the personality of the individual and the addict's immediate environment. The processes of industrialization, urbanization and migration have led to loosening of the traditional methods of social control rendering an individual vulnerable to the stresses and strains of modern life. The fast changing social milieu, among other factors, is mainly contributing to the proliferation of drug abuse, both of traditional and of new psychoactive substances. The introduction of synthetic drugs and intravenous drug use leading to HIV/AIDS has added a new dimension to the problem, especially in the Northeast states of the country. Drug abuse has led to a detrimental impact on the society. It has led to increase in the crime rate. Addicts resort to crime to pay for their drugs. Drugs remove inhibition and impair judgment egging one on to commit offences. Incidence of eve- teasing, group clashes, assault and impulsive murders increase with drug abuse. Apart from

affecting the financial stability, addiction increases conflicts and causes untold emotional pain for every member of the family. With most drug users being in the productive age group of 18-35 years, the loss in terms of human potential is incalculable. The damage to the physical, psychological, moral and intellectual growth of the youth is very high. Adolescent drug abuse is one of the major areas of concern in adolescent and young people's behavior. 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 gateway drugs. However, there is a wide regional variation across states in term of the incidence of the substance abuse. For example, a larger proportion of teens in West Bengal and Andhra Pradesh use gateway drugs (about 60 percent in both the states) than Uttar Pradesh or Haryana (around 35 percent). Increase in incidences of HIV, hepatitis B and C and tuberculosis due to addiction adds the reservoir of infection in the community burdening the health care system further. Women in India face greater problems from drug abuse. The consequences include domestic violence and infection with HIV, as well as the financial burden. Eighty seven per cent of addicts being treated in a de-addiction center run by the Delhi police acknowledged being violent with family members. Most of the domestic violence is directed against women and occurs in the context of demands for money to buy drugs. At the national level, drug abuse is intrinsically linked with racketeering, conspiracy, corruption, illegal money transfers, terrorism and violence threatening the very stability of governments. India has braced itself to face the menace of drug trafficking both at the national and international levels. Several measures involving innovative changes in enforcement, legal and judicial systems have been brought into effect. The introduction of death penalty for drug-related offences has been a major deterrent. The Narcotic Drugs and Psychotropic Substances Act, 1985, were enacted with stringent provisions to curb this menace. The Act envisages a minimum term of 10 years imprisonment extendable to 20 years and fine of Rs. 1 lakh extendable up to Rs. 2 lakhs for the offenders. The Act has been further amended by making provisions for the forfeiture of properties derived from illicit drugs trafficking. Comprehensive strategy involving specific programmes to bring about an overall reduction in use of drugs has been evolved by the various government agencies and NGOs and is further supplemented by measures like education, counseling, treatment and rehabilitation programmes. India has bilateral agreements on drug trafficking with 13 countries, including Pakistan and Burma. Prior to 1999, extradition between India and the United States occurred under the auspices of a 1931 treaty signed by the United States and the United

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Kingdom, which was made applicable to India in 1942. However, a new extradition treaty between India and the United States entered into force in July 1999. A Mutual Legal Assistance Treaty was signed by India and the United States in October 2001. India also is signatory to the following treaties and conventions:

1961	U.N.	Convention	on	Narcotic	Drugs,
1971	U.N.	Convention	on	Psychotropic	Substances,
1988	U.N. Convention	Against Illicit Traffic	c in Narcotic	Drugs and Psycho	tropic Substances
2000 Transnational Crime Convention					

credits: Azad India Foundation

The spread and entrenchment of drug abuse needs to be prevented, as the cost to the people, environment and economy will be colossal. The unseemly spectacle of unkempt drug abusers dotting lanes and by lanes, cinema halls and other public places should be enough to goad the authorities to act fast to remove the scourge of this social evil. Moreover, the spread of such reprehensible habits among the relatively young segment of society ought to be arrested at all cost. There is a need for the government enforcement agencies, the non-governmental philanthropic agencies, and others to collaborate and supplement each other's efforts for a solution to the problem of drug addiction through education and legal actions.

Drug addiction is a chronic, relapsing disease, characterized by compulsive drug seeking and use, and by neurochemical and molecular changes in the brain. Drug abusers gradually spend more and more time and energy obtaining and using the drug. Once they are addicted, the drug abusers' primary purpose in life becomes seeking and using drugs.

Drug addiction is becoming a major health problem in India with some estimates indicating that as many as 15 million people in India could become addicts by the end of 2004. Link between drug abuse and crime is well established but recently the association between drug addiction and HIV/AIDS has been a prime concern for health authorities in India. A significant recent shift in drug use patterns in India is the move from smoking to injecting drug use. Heroin, buprenorphine (tidigesic/tamgesic) and dextropropoxyphene (spasmo-proxyvan) are the most commonly

injected drugs in India. In a study of Indian opioid addicts, researchers found 8.3% of injectible drug users were HIV-positive. The drug problem and its consequences have been particularly alarming in the north-eastern states. In some states of north-east 80% of all injectible drug users were HIV positive. Trafficking from Myanmar brings in high quality heroin, which is usually injected by abusers. The problem has now reached the higher echelons of society, along with the lower strata, and includes children, and students in urban areas. Daily wage earners/laborers, rag pickers, truck drivers, medical workers and youths are all equally susceptible to the menace of addiction. Heroin in urban areas and opium in rural areas have emerged as the two most commonly used drugs. Increasing trend of drug and alcohol, addiction in large cities, especially the metropolitan cities is alarming. A recent report on India by the UN Drug Control program cites that in Delhi, 44.7% of treatment seekers were heroin addicts while alcohol accounted for 26.4%. Mumbai is considered as the country's major drug trafficking center. States like Tamil Nadu, Kerala and Andhra Pradesh are centers for cannabis related drugs while in northern states of U.P, Bihar and M.P, poppy (from which opium is derived) is cultivated in some areas.

Narcotics Drug and Psychotropic Substances Act was passed by the parliament in 1985 and Narcotics Control Bureau was set up in 1986 to counter drug abuse and illicit drug trafficking. Traditionally opium and cannabis derivatives, LSD, Mandrax, cocaine, barbiturates etc. have been used by drug addicts. But recently use of 'synthetics' that include stimulants like amphetamine and its derivatives, methcathinone, varnish, paint and glue as drugs for addiction has also increased. These substances are readily available everywhere and are not covered by law. Health problems arising due to drug/alcohol addiction depend on the type of drug that is being abused and duration of abuse. Here we will take examples of alcohol, Heroin and Amphetamine:

- 1) Alcohol abuse can result in psychological dependence, liver disease, (hepatitis, cirrhosis), chronic pancreatitis, gastritis and gastric ulceration, cardiovascular problems (e.g. hypertension) and neurological problems. A strong association exists between alcohol use and cancers of the esophagus, pharynx, and mouth, whereas a more controversial association links alcohol with liver, breast, and colorectal cancers. A person is generally considered to be dependent on alcohol when they have experienced three or more of the following symptoms during a year:
- a strong urge to drink,

- difficulty controlling drinking,
- physical withdrawal symptoms, such as sweating, shaking, agitation and nausea when they try to reduce drinking,
- a growing tolerance to alcohol (needing larger quantities to get the same effect),
- gradual neglect of other activities
- Persistent drinking even though it is obviously causing harm.
- 2) Heroin can cause Addiction, depressed respiration, clouded mental functioning, death due to overdose, nausea and vomiting, spontaneous abortion in pregnant woman. Intravenous use can cause Infectious diseases (e.g., HIV/AIDS and hepatitis B and C), collapsed veins, bacterial infections, arthritis and other rheumatologic problems.
- 3) Long-term heavy use of amphetamines may lead to malnutrition, skin disorders, ulcers and diseases resulting from vitamin deficiencies. Regular use may contribute to lack of sleep and weight loss. Intravenous users are at risk for serious, life-threatening diseases such as AIDS, lung and heart disease and other cardiovascular diseases. Frequent use of large amounts of amphetamines may eventually result in mental illness, suicide and violent death. Amphetamine-induced psychosis is a paranoid state that may develop after ingestion or the injection of large doses of amphetamines.

People resort to drug/alcohol abuse for many reasons. Some of the reasons are -

Seeking pleasure, relaxation and adventure

Psychological disturbance (depression, social maladjustment, parental neglect etc.)

Medical problems (to overcome severe and/or chronic pain)

Religious/social reasons

Children and youths trying to imitate their icons (e.g. movie and sports stars, rock artists)

Besides these physical and health problems drug addiction is a major social problem with increase incidence of crime in drug/alcohol addicts. Drug addiction causes immense financial and psychological problems for the addict and his/her family.

So what can be done to counter this menace?

Improvement in the existing laws is needed to plug the loopholes that would help in decreasing drug pedaling. Better implementation of the law by enforcement agencies.

Active judiciary that would quickly dispose drug offence related cases and aggressively punish the guilty. Better rehabilitation programs for the addicts and easy access to rehabilitation centers. At present only a limited number of rehabilitation center and rehabilitation programs are available for drug/alcohol addicts in India. Increase the public awareness regarding the hazards of drug/alcohol addiction by using mass media like television, newspapers, magazines, radio etc. e.g. You can learn a lot about heroin abuse and recovery by reading up on the subject in books, magazines, and on the Internet. Public figures and icons should aggressively participate the anti drug campaign. Social, psychological and economic support to the family of the addicts. A concerted effort by the government, judiciary, social organization and responsible members of society is needed to control this menace.

Drug abuse high in Andhra Pradesh

The State has recorded the highest number of cases of habit-forming drugs in the country and Visakhapatnam district, including the city, has the highest number of such cases in the State. To control the menace, Director-General Drugs and Copy Right, Drugs Control Administration R.P. Meena recently instructed all drug control officers of the State to intensify the operations against drug peddlers, Drugs Inspector and Licensing Authority of Drugs Control Authority R. Uday Bhaskar said on the eve of International Day Against Drug Abuse and Illicit Drug Trafficking. It was observed that apart from the commonality of the problem, the most dangerous aspect was that youngsters were the most common victims. In a recently conducted joint operation by the Task Force Police and the Drugs Control Authority (DCA), five college students, including a girl, were caught red-handed while purchasing Fortwin injections from a medical shop near Appu Ghar on the Beach Road.

Speaking about the number of incidents where youngsters could purchase drugs without the prescription, Police Commissioner N. Sambasiva Rao said, "Youngsters being prone to addiction is a dangerous signal for any society. In the adolescent brain, the centres for judgment and self-control are still developing, resulting in many teens being less than careful about the decisions they make and more open to risk-taking. We are taking strong measures under the Narcotics and Psychotropic Substances Act and working in conjunction with DCA against drug peddlers. We are also counselling the young victims to control the problem."

For the past six months stringent measures have been taken against the sale of the drugs. Thirteen chemists of Visakhapatnam, Vijayawada and Anakaplle are being tried in five cases in

different courts of Visakhapatnam. The most commonly abused drugs in the district were

codeine phosphate syrups, pentazocine lactate and nitrazepam, according to the DCA.

The DCA has also conducted a survey in Visakhapatnam, Srikakulam and Vizianagaram districts to identify the chemists and distributors involved in purchasing and selling the habit-forming drugs without prescription. Based on the survey, they identified the shops that were purchasing these stocks from Anakapalle, Elamanchili, Pendurthi, Simhachalam, Gopalapatnam, Muralinagar and Prahaladapuram areas and raided them along with the Taskforce Police on May 22 and May 25.

The Lost Generation

Excessive use of these drugs is a disease and family and society support is very crucial in managing it. "There is a very thin line between substance use and abuse. Drug dependence is defined by the role drugs play in your life and you need to be aware of the signs of danger among people around you," say drug de-addiction experts and psychiatrists.

If your kid just drinks, you should be relieved'. Words from a mother of a teenager who went on to describe how teen parties in the capital went beyond alcohol. 'Forget a round of shots', I was told, 'drugs at these parties are as common as iPhones the children carry'. Many urban families are struggling to stay sane. Both parents working late hours, constant travel and stress all contribute to a family that is increasingly substituting love with money that buys not just latest gadgets and clothes but also candy, though not quite from a candy store.

There was a time when Goa was notorious for drugs. Now, it seems you don't need to go anyplace; you just need to be found. Cocaine has become as much a part of some social circles as a glass of wine. I am not just referring to the page 3 crowd; twenty-seven per cent of call centre workers in the country reportedly use drugs. Karnataka and Andhra Pradesh today have the highest number of schoolchildren using drugs; politicians claim 70 percent of the youth in Punjab are addicts. Over the years, parties in the capital were (and still are) notorious for open drug use and hotel washrooms became meeting points for peddlers and their clients. It might not



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be as blatant anymore, but it certainly is more prevalent; doorstep delivery any time of the day or night. Natural opiates like hashish and marijuana are generally limited to teenagers on a budget; in many parties, these are akin to smoking a cigarette. What has revolutionised the market are more lethal synthetic substances, popular with a generation that now experiments with cocktails; simply put, a mix and match of drugs.

Mumbai is taking it a snort further. Until a few months earlier, a new and cheap drug Mephedrone, commonly called meow meow was legally available and could even be ordered online. A poor man's cocaine, this white powder cost just Rs.150 per gram. With almost 80,000 children between the ages of thirteen and sixteen believed to be addicted to meow meow, the drug was banned in February this year. But the market for Cocaine, which costs Rs. 3,000 for a gram is only expanding, with increasing popularity amongst the rich and glamourous. It is also one of the most dangerous, laced with unknown substances, including powdered glass. The purer it is, the higher it costs. If you want the best, you could even be paying Rs. 20,000 per gram. The nation's drug problem is not a phenomena exclusive to the well-heeled. Nowhere has the problem exploded more than in Punjab, where lines between urban and rural drug abuse have merged. Declining agricultural incomes and increasing unemployment have made drug addiction a culture in the state. Consider this – as far back as 2009, a submission to the Punjab and Haryana High court by the Department of Social Security, Women and Child Development stated that there was at least one drug addict per family in rural Punjab. That number is likely much higher today. Deputy Chief Minister Sukhbir Badal says Punjab is being unnecessarily maligned and that drug usage is because of smuggling from across the border. The United Nations 2011 drug and crime report says India is the largest consumer of heroin in South Asia, contradicting claims that Punjab is only a transit point for drugs coming in from Afghanistan and Pakistan.

For long, social activists in Punjab have pointed to links between politicians and the drug mafia in the state. Campaign money for elections allegedly comes through sale of drugs, just as votes are bought by gifting narcotics. In 2014, the Enforcement Directorate questioned Punjab Revenue Minister and Sukhbir Badal's brother-in-law Bikram Singh Majithia in a Rs. 6,000 crore synthetic drug racket. Majithia says he is being framed, there were attempts to mysteriously

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transfer the interrogating officer to Kolkata. But the High Court intervened, the officer stays for now and the investigation remains, well, 'ongoing'.

An MLA of Majithia's Akali Dal party and former national hockey captain Pargat Singh paints a grim picture of the state saying 80% of the youth are addicted to drugs. Perhaps the biggest jolt to our senses comes from Health Minister Surjit Jayani, who wants compulsory drug tests in schools from class 8 onwards. That would be on children as young as 13-14 years old. The minister has honestly and openly said what many speak behind closed doors; students use drugs, with deals made in school canteens.

In 2013, almost half of all cases registered in India under the Narcotics Drugs and Psychotropic Substances Act were from Punjab. Prime Minister Modi acknowledged the enormity of the problem when he asked the youth to have courage to say no to drugs. But in a state where drugs are easily available, rumoured with political patronage, it's easier said than done. BJP President Amit Shah was to launch a campaign against drugs starting with a rally in Amritsar. The rally never happened. Shah did come to Amritsar, but only for a closed-door meeting to discuss party affairs. Not surprising, since BJP is an ally of the Akali Dal in Punjab.

Forget the politics for a moment. Forget even the physical damage to an addict. Its the economical and emotional impact that is testing society. Children with a normal upbringing are becoming monsters and taking to crime to get money for their next fix. Increasing cases of chain snatching and petty crime are reported across many cities in Punjab. Women going for morning walks have stopped carrying their mobile phones, let alone wear any jewellery. Things have become desperate in some households; a father was physically assaulted with a chair by his own child for being refused money. Many other families have been ruined, spending money they cannot afford on rehabilitation, although the few centres that do exist are hardly professional. Those who can, are sending their children abroad to get them out of this quagmire. But the poor have nowhere to run or hide.

Two kilometres from Amritsar lies Maqboolpura. It's also infamously known as the 'place of widows and orphans'; a neighbourhood that has lost as many as four hundred men to drugs,

while others wait aimlessly for their next dose. Other villages in Punjab have an equally horrific story, but they remain below the radar and perhaps always will. The National Sample Survey Organisation has put its hands up, saying it does not have the expertise to survey drug abuse. More than 20,000 people have committed suicide due to drug addiction related issues in the last 10 years. That's seven deaths a day! We need to treat this as the epidemic it ominously is, translate words into action, reign in the politics, and stop turning a blind eye to problems our society and culture doesn't like to admit to. Else rural or urban, we'll soon be facing India's lost generation. It may already be too late.

Conclusion

Substance use and abuse wear out individuals, families, and communities. Prevention is the most important component of the "war on drugs" which is fulfilled by qualitative scientific research on those areas crucial to the advancement of prevention science. Progress should be made in identifying precursors to use, understanding the developmental progress of alcohol and drug use disorders, and designing prevention programs that successfully avert substance use and abuse. However, this study evaluated substance abuse in a small group and in a specified geographic area. To generalize this conclusion it requires an epidemiological survey.

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