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AN EMPIRICAL INVESTIGATION OF INTERVENTION MEASURES & ITS AWARENESS AMONG DRUG ABUSERS

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Abstract

From past studies it can be inferred that wide range of psychological issue instigated by the turmoil going over there in Kashmir served as a strong predictor of substance abuse. People might have tried drugs to escape from tension. From dawn to dusk people living in Kashmir has been witnessing every threshold stressors. This tendency of gross psychologically threatening environment added fuel to the sufferings of Kashmiris. Hence, it is clear that drug abuse problem has emerged a major challenge in the society and to deal with comprehensive and complementary strategies are required. The present study looks in this problem social and ecological prospective and aims to identify the intervention and prevention programs, aimed at curbing drug abuse. This study is descriptive in nature. In this study, multi-stage sampling technique was used to draw samples for the final survey. The present study selected three Districts for the data collection on drug abuse and prevention programs operating in these districts. These three districts are Barmullah in the north, Srinagar in the center and Anantnag in the south.

Keywords: Drug, Intervention, Policy etc.

1. INTRODUCTION

Drug abuse is one of the most serious challenges being faced by the contemporary societies. It is a multifaceted phenomenon with combined effects of social, familial and psychological factors. It is a behavior whose manifestation depends upon the complex drug-individual-society relationship and which is deeply rooted in the socio-economic-cultural fabric of the society. When an individual find himself isolated for psycho-social, economic or cultural reasons, his desire for belonging leads him to similar people who also feel isolated and may have sought escape or relief on drugs. In this way, a real drug culture develops. The drug culture tends to isolate the drug abuser from the general normative structure of the society, which they consider hostile and by whom they are often considered alien or deviant. In the last two decades, the tentacles of drug abuse have spread so alarmingly that it is causing serious concern to the international community. Drug abuse is now no longer limited to traditional user -groups, the youths of the industrialized urban areas. The scourge is spreading to the youths of the rural areas and even school children. Unlike other types of disorder, the addiction illustrates a peculiar "contagion" or "infection" in that a special problem exists. This phenomenon in addiction is the introduction of others to the use of drugs and thereby expanding the social network of addiction. It was estimated by Bourne and Ekstrand (1976) that each addict introduces an average of six others to narcotics. The drug abuse disorder has been worsened by the emergence of a new paradigm to already existing problem, i.e. formation of a visible link between intravenous drug use to human immuno-deficiency virus (HIV) and Aids. Now the

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formidable task posed before humankind is not only the prevention of drug use alone, but the prevention of HIV infections, use of needles and pricks in the skin by the drug users. The drug problem is therefore a major concern of humanity which has taken its toll a whole generation, perhaps more, and as one can well expect many more will be its victims. All indications point to the fact that the battle against drug abuse is going to be grim in the coming years.

Turmoil of Kashmir throughout three decades has resulted in an increase of psychiatric and psychoneurotic illness and psychosocial disturbances. Several psychiatric problems have emerged like Depression, OCD, PTSD, Drug Addiction, etc. As long as the problem of drug addiction in Kashmir is concerned it has observed that this conflict ridden region has a tremendous rise in substance abusers over the past decade. United Nations Drug Control Programme (UNDCP) reported that around 70000 people are drug addicts in the Kashmir valley alone among which 4000 are females. Several studies conducted in the valley revealed that youth particularly between the age group of 17-30 involved in this menace of drug addiction. Government Psychiatric Hospital only mental health hospital in the valley in one of its report stated that most numbers of drug addiction cases belong to a very young generation. The director of Drug De-addiction center Srinagar Dr. Khan stated that "the trend of drug abuse is on the rise among school children as we have registered many such cases, where students of Class IX to XII are involved with drugs".

A renowned psychiatrist in Kashmir Dr. Margoob and Duta in their book have reported that around 2.11 lakh drug addicts are in Kashmir valley. The common Substance used by Drug Addicts in Kashmir are Cannabis, Brown Sugar, Heroine, SP tablets, Anxit, Alprax, Inhalants like Fevicol, SR solution, Thinner, Shoe Polish, Paint varnish and dirty socks are used as substances. The alarming rate of this menace in Kashmir leads the academicians and experts to comment that "We have lost one generation to bullets and we may lose another generation to drugs". Margoob and Duta in one of their study conducted in the year 1993 stated that most drug addicts were males and mainly their substance of addiction is Cannabis. Naqshbandi in his paper "drug addiction and youth of Kashmir" interviewed 270 young Kashmiri people between the age group of 16-30 in different districts of Kashmir. His findings revealed that Conflict and unemployment were the mains reasons of drug addiction among the youth. Several studies had shown that 80% of drug addiction among college students in Kashmir valley shows that majority of students believe that people started to take drugs in the age group of 20-30.

2. AIM OF THE STUDY

The main aim of this study is to examine the protection, prevention and intervention measures available to eradicate the menace of drug abuse.

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3. RESEARCH METHODOLOGY

- **Research Design:** The present study is a cross sectional survey framework which utilization both quantitative and qualitative techniques.
- Sample size and Sampling techniques: In this study, multi-stage sampling technique was used to draw samples for the final survey. The main respondents of the study consisted of 408 students and 75 Social Support Service Providers. The total sample size was 483 respondents.
- **Data collection Procedures:** After obtaining research permit, from the Research Ethics Committee (REC) and the drug de addiction centers, under study, the researcher systematically observed the necessary protocol and procedures to access the substance users and Social service providers. For confidentiality purposes, the main investigator preferred to carry out in-depth interviews with selected groups of the respondents.
- **Study Area:** The present study selected three Districts for the data collection on drug abuse and prevention programs operating in these districts. These three districts are Barmullah in the north, Srinagar in the center and Anantnag in the south.
- **Data analysis techniques:** Systemization of the four data collection instruments namely; student questionnaire (SQ), Qualitative Interview Schedule (GIS), Focus Group Discussion (FGD) and Structured Observation Guide (SOG)

4. RESULT AND DISCUSSION

4.1 Gender

Gender is regarded as very crucial in role identification in society. But in case if mental health setting, gender doesn"t play any differential role with respect to prevalence of psychological problems. In older times women were fond of *hukka*. Though substance abuse in case of substance abuse in case of women is very un-acceptable phenomenon is Kashmir.

Gender	Number	Percentage
Male	381	92.92
Female	29	7.08
Total	410	100

Table 1: Gender wise distribution of Substance abuse

Table 1 reports that 7.08 percent of women from the sample lot of 410 respondents were found substance abusers. This disparity in the ratio of substance abusers is the clear indication of those male abusers (92.92 percent) has more interaction with the outside environment than their counterparts, and this turns out to be the conducive and reinforcing factor for them. But on the other hand the ratio of female abusers is alarming too. Irrespective of the gender substance abuse is menace for the society.

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4.2 Occupations

Occupation	Number	Percentage
Student	128	31.30
Business	46	12.00
Driver	106	25.85
Laborers	75	18.30
Others	55	13.47
Total	410	100

Table 2: Showing occupations of drug abusers

As clear from the above table 2, that most of the substance users are students (31 percent) followed by drivers (25.85 percent) and laborers (18.30 percent). Social environment and uncertainty about the future, forces students to divert from studies and indulge in drug related activities. Students and unemployed youth found themselves against the walls due to rising unemployment and pressure of studies. This pressure and uncertain future had devastated the life of youth in the Kashmir valley. Again, due to political instability and prolong conflict had badly affected all sector of the economy and transport sector is no exception. As a result of no earnings, people affiliated with sector are getting involved in illicit activities like substance use, especially drivers. In addition to this, transport sector is exposed all sort of activities which bring them in contact with those already involved in drugs use and trade.

4.3 Age

AGE	NUMBER	PERCENTAGE	INTRODUCER	Number	Percentage
BELOW 15	10	2.43	Friends	234	57.07
16-25	262	64.40	Colleagues	119	29.02
26-35	90	22.20	Self-motivated	16	4.00
ABOVE 35	48	11.70	Drug dealer	41	10.00
TOTAL	410	100	Total	410	100

Table 3: Age wise distribution of drug abuse and Source for introducing to it

Table 3 is showing the age wise distribution of drug abuse and source for introducing to it. The age group of 16-25 is found to be comprising of 64 percent of drug abusers. As it is significantly clear that age group of 16-25 is largely influenced by this menace. It is pertinent here to mention that this age group includes adolescents as well. Adolescence on the other hand is marked by the transition from childhood to adulthood; it is an important developmental phase, marked by a multitude of significant physical, psychological and social changes.

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4.4 Awareness of DSAPP

Occupation	Yes	No
Students	45	55
Laborers	39.5	60.5
Businessmen	47	53
Drivers	42.5	57.5
Others	38	62

Table 4: Awareness of DSAPP

This study found it significant to gauge students" level of awareness of prevention programs. Question on whether substance users were aware of prevention programs in their societies revealed that; students (45 percent), laborers (39.5 percent), businessmen (47 percent) and drivers (42.50 percent) were aware as compared to those who were not aware 55 percent, 60.50 percent, 53 percent and 57.50 percent respectively.

Fundamentally, lack of awareness has a chain effect on trends of drug abuse rates and effectiveness of prevention programs. FGD and QIS projected a contradicting picture in their assumption that, almost all the students in the university should be aware of prevention programs. This scenario creates a gap that should be addressed by Social

Support Providers in drug centers and societies if prevention effectiveness is to be realized. It was clear that these assumptions were not based on any baseline surveys that have been undertaken, placing DSAPP at the risk of blindly establishing programs which have no users" interest and on flimsy assumptions.

4.5 Reasons why drug abusers were not aware of DSAPP

Unfortunately this seems to be missing in universities/colleges and workplaces based on these findings, Pertinent on this issue of lack of awareness are necessity to develop understanding of the factors responsible for lack of awareness. Not all studies however agree on the effectiveness of awareness campaigns as evidenced by (Aveyard, 1999) argument that although drug and alcohol awareness campaigns have been carried out in universities/colleges or other places, little is known about their effectiveness. A situation like this could arise if there is no calculated interest in selectivity of campaign methods as was projected by findings of this study. Effective campaign methods are critical in degree of DSAPP activities" utility.

Respondents were asked to provide reasons why they were not aware of prevention programs. The results are given below.

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Table 5: Reasons why drug abusers were not aware of DSAPP

Reasons	Percentage
Lack of information	45
Small number of drug abusers	22.7
Lack of participation	10.3
Lack of time	7.4
Drug de addictions ^{***} management, attitude and rules	8.6
Lack of interest	6

Lack of information is the principal factor (45 percent), poor dissemination methods (19.0%), small number of drug abusers (22.70 percent), lack of participation (10.30 percent), lack of time to implement activities (7.40 percent), DSAPP and lack of users interest in DSAPP (4.8%) are other factors for lack of awareness.

4.6 DSAPP impact on drug abuse prevention

In order to gauge implementation effectiveness, a question was given to student respondents on whether DSAPP had any impact on prevention. More than half of students from three universities attested to the fact that DSAPP had an impact on drug abuse students (72 percent), laborers (69 percent) and businessmen (74.50 percent).

Occupation	yes	No
Students	72	28
Labors	69	31
Businessmen	74.5	25.5
Drivers	67.5	32.5
Others	77	23

Table 6: DSAPP impact on drug abuse prevention

Discussion also raised issues on how the drug de-addiction centers engage spiritual approach exclusively to address drug abuse. Information further revealed that support by the management on DSAPP was poor because management thinks that rules will deal with the problem. Stringent rules have been stipulated to reduce the number of students who abuse drugs. This mentality is based on the assumption that students are expected to practice religious ideals and therefore no one is expected to be using drugs at all. Their argument was that DSAPP would implement drug abuse prevention far much better than the stringent rules which seem to have no concern for those abusing drugs based on what they thought was evidence from students who used drugs despite the rules but who had positively responded to stopping whenever they sought help from DSAPP. Other centers are in agreement as well that DSAPP makes an impact on prevention because some students seek help from prevention programs. According to them, seeking help justifies DSAPP effectiveness without which, students wouldn't be going for them.

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FGD and QIG strongly supported the fact that DSAPP are effective tools to deal with the problem of drug abuse. Their argument demonstrated a good number of students whose academic performance, relationships and drug abuse prevention had been restored due to counseling services.

5. CONCLUSION

Implementation of DSAPP can be ensured in the presence of synchronization and integration of activities, responsibilities, and action command to ensure that resources are used most efficiently amongst departments. Respondents attested to the fact that most sections function semi- autonomously with the mandates stipulated to them in the university policy without necessarily indulging with other department. Referral system was the major means by which most prevention programs coordinated activities. However, there was an enormous consensus that every program dealt with their own issues in their own way without necessarily consulting with other programs and departments. A loophole is depicted from research findings on insufficient coordination among student and staff DSAPP which could impinge on effectiveness due to lack of concerted effort, shared resources and facilities. Discussion also raised issues on how the drug de-addiction engages spiritual approach exclusively to address drug abuse. Information further revealed that support by the management on DSAPP was poor because management thinks that rules will deal with the problem. Stringent rules have been stipulated to reduce the number of students who abuse drugs. This mentality is based on the assumption that students are expected to practice religious ideals and therefore no one is expected to be using drugs at all. Their argument was that DSAPP would implement drug abuse prevention far much better than the stringent rules which seem to have no concern for those abusing drugs based on what they thought was evidence from students who used drugs despite the rules but who had positively responded to stopping whenever they sought help from DSAPP.

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