

A Study on Drug Addiction among the People of Bandipora Kashmir and Suggestions for Preventive Measures

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Abstract

Drug addiction is a one of the fast growing problem among the youth in the world and Bandipora District of Kashmir Valley is no exception due to prolonged turmoil, unemployment and economic uncertainty. The present study was conducted to know about the reasons of drug addiction, awareness among the people of Bandipora about drug abuse and the preventive measures adopted by the stake holders. 600 persons were selected at random from different areas of Bandipora. Among them 300 were male and 300 female. A questionnaire was circulated among them during the year 2023. The results obtained revealed a horrifying picture and a threat for entire society if the drug menace is not controlled.

Keywords: Youth, unemployment, Bandipora, drug addiction, awareness.

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INTRODUCTION

We are facing serious challenges like poverty, corruption, begging under development, unemployment etc in the today's world and all these problems give rise to a new problem and that is one of the fast growing problems that is drug addiction. Drug addiction refers to the excessive and repeated use of drugs. They are taking the place of life values and are making life in itself void of meaning. Children and teenagers are silent victim of drug abuse and are leading to the destruction of their own lives. The addiction of drugs is so deadly that people fall prey to its use and become slave to it. It is growing fast among the youth of developing countries and in the developed countries. As the time passes through the range of drugs increased to alarming level, drugs like narcotic, brown sugar, opium, heroin, morphine, Depressants: Alcohol, diazepam, phencyclidine, psilocybin and cannabis: Ganga, charas, harsh oil are frequently used by the people. It is reported that tobacco, cannabis (Charas), Alcohol, benzobiazepines (sleeping pills, like alprax, valium), opiates (like codeine, heroin, morphine), brown sugar, inhalants (like fevicol, SR, glue, paint thinner, petrol, shoe polish) are major drugs of abuse in Kashmir [1 to 4]. The valley of Kashmir is known as "Pir Waer" the abode of saints is becoming India's drug hub due to turmoil unemployment and economic uncertainty. It is reported that more than a

million druggists exist in Kashmir at present out of which 4000 are young girls. Everybody knows the situation through which the Kashmir has been going from past 30 years. Since the people of Kashmir are very much sensitive they were the most harried lot. In order to get out of the mental block these people would visit the medical shops in their vicinity and the person sitting there would prescribed some medicines to them giving them temporary relief. The geographical location of Jammu and Kashmir is such that the transport of drugs is early possible across the state. The prevailing turmoil is also claimed to have worsened the drug above problem alongside as unusual increase in other psychiatric disorders in Kashmir. According to [5] million heroin addicts are registered in India and unofficially there are as many as 5 million [2].

According to a survey conducted by United Nations Drug Control Programme (UNDCP) there are 70,000 drug addicts in Kashmir Division alone including 4000 women. As per recent survey 65% to 70% students in Kashmir are drug addicts who include gateway drugs too and along 26% female students. As per government psychiatric diseases hospital statistics, 90% of drug abusers belong to the age group of 17 to 35 years with a lifetime prevalence of drug addiction. Kashmir as it is known for its attraction for tourists and migrant laborers which increase rate of different drug use among drug

addicts. Easy availability and lack of accountability from parent gateway drugs like cigarette, paan, gutka etc are commonly used by young people aging 12-15 years [3]. A recent study done by Department of Psychiatry Government Medical College Srinagar has revealed that Kashmir has surpassed Punjab in drug abuse cases and is currently at No. 2 position among the drug abuser states in India. This deadly poison is spreading like a fire. The main reason for a drug addiction in Kashmir is unemployment issues. Besides that parent – adolescent relationships, bad influence of friends and peers also play a vital role in adding fuel to the fire of drug addiction. To stop this menace, Government is playing an important role by forming campaigns and awareness drives. One such governmental committee is *Nasha Mukta Bharat Aabhiyan*, launched on 15th of August 2020 in 242 Districts, which are considered to be most vulnerable to drug abuse. The main aim of this organization is to spread awareness on drug addiction and to conduct surveys on the same. It focuses on counseling and treatment facilities in hospitals and rehabilitation centers in India. Many preventive steps should be taken not only by the government but also NGO's and the public should also join hands to make India drug free. For this purpose awareness programmes should be organized in schools, colleges and at village panchayats.

Literature Review

Magroob and Dutta [1] suggested that most drug abusers were males and their substance of abuse was cannabis followed by heroin. Researchers have conducted the study on the sample which was mainly ranging between the age group of 26 to 35 years which is considered as an adolescent age. It would have been a better study if teen age group would have also been included in the study.

Chuah *et al.*, [6] mentioned in their study that opium addiction is now less common but abuses of newer opioids like heroin, cannabis, marijuana are on the increase.

Chopra [7] mentioned in his study that psychiatric ill-effect of chronic drugs uses are more difficult to evaluate with certainty. Nutritional deficiencies, head injuries and periods of partial anoxia associated with profound intoxication are probable aetiological factors involved. Large doses of amphetamine, LSD, cannabis and the newer synthetic "Hallucinogens" can and do produced disturbances of perception and emotional response which are part of their hallucinogenic effect. Drugs, produce physiological changes which on, interruption of drug use, give rise to characteristic, clinically observable withdrawal syndromes.

Thacore *et al.*, [8] suggest in their study that Methqualone is being abused by a cross section of population. Most of them were introduced to the drug by doctors who in many instance happened to their friends.

It is taken to experience a feeling of euphoria and a sense of pleasure and may be used regularly or sporadically. Study further mentions that it appears to be an effective tranquillizer and may be of value in treating alcoholic withdrawal symptoms but not without risk substitution.

Collier [9] suggested a different explanation for the development of tolerance and physical dependence. He proposed that when tolerance occurs without development of physical dependence, it is due to increasing in silent receptors and decrease in pharmacological receptors but with drug dependence, tolerance occurs due to decrease of some excitatory transmitter. This causes an increase in pharmacological receptors upon withdrawal of the drug of normal quantum transducer is liberated which acts on a supersensitive neurone and thus abstinence syndrome results.

Winslow *et al.*, [10] suggested that morphine acts at two different receptor sites in a neuronal pathway. It acts at the receptor on the distal neurone and depresses the conduction, resulting in depression and euphoria, but it enters the proximal neuron and by certain biochemical changes. It builds up hyper excitability. These actions are antagonistic and hence to produce the same degree of depression more drugs are required. On drug discontinuity the latent hyper excitability become manifest as abstinence syndrome.

Abuse, Division of epidemiology and Research (2003) suggests that the child is more vulnerable for drug addiction if he is kept in condition where more risk factors prevail. As per findings many risk factors like aggressive behaviour in schools leading to rejection by Peers, punishment by teachers and academic failure can lead to the most immediate behaviours that put a child at a risk, for drug abuse such as skipping school and associating with peers who abuse drugs. As per the study, research based preventive programmes can intervene early in Child's development to strengthen protective factors and reduce risk factors.

Rao *et al.*, [11] in their study has shown that most of drug addicts nearly 80% get this addiction before age of 30. Their study reveals that major substance of abuse was either cannabis or alcohols.

Drugs *et al.*, [12] suggests that religion plays a major role in shaping the individuals world view and existential understanding. Alcohol, cannabis, opium, mushrooms have been used for rites in many cultures. Hindus believe that god Shiva was very fond of hemp drugs. These drugs are still offered to Shiva in temples on the night of Shivaratri.

Sudan [13] suggested in his study that youth are at forefront of violent conflict, often fighting without a choice. Youth of Kashmiri consistently reported that they continue to have serious psychological and social

difficulties as a result of the ongoing violence and deprivation they had experienced during the last few years such as feelings of hopelessness and profound social alienation.

Nadeem *et al.*, [14] have mentioned in their study that changing cultural values increasing economy stress and dwindling supportive bonds are leading to initiation into substantives. Their study also showed that industrialization, urbanization and migration has lead to loosening of the traditional methods of social control rendering and individual vulnerable to the stresses and strains of modern life.

Aaqila *et al.*, [15] studied the helplessness among the children of Jammu and Kashmir. The study reveals that the counseling sessions need to be arranged to the students so as to overcome the helplessness.

METHODOLOGY

The present study was conducted by the department clinical psychology OPJS University Rajasthan in collaboration with Mission Youth Jammu and Kashmir.

The present study applied both quantitative and qualitative methods in order to obtain holistic insight into the objectives of the study. The exploratory nature of the study necessitated a quantitative approach in order to obtain the perceptions and feelings of participants and the underlying issues, which qualitative data would omit. The study adopted quantitative techniques using survey methods because it can empirically test the hypothesis used in the study. A questionnaire developed was pre-tested and validated by specialist and experts using

appropriate statistical tools. The survey was carried out by using interview schedule and targeted at random 600 people, 300 male and 300 female from different areas of District Bandipora. The questions were asked in simple and easy way to understand language. The answers were immediately marketed on the interview schedule and this was done so that no details escape the mind. The data collector was carefully analyzed by using appropriate statistical tools with the help of statistical package SPSS version 16.0.

Hypothesis:

There will be no significant difference in awareness between male and female respondents selected from Bandipora Kashmir.

Chisquare test was used to test the hypothesis. The value of chisquare was calculated by using following formula.

$$\text{Chisquare} = \sum \frac{(O_i - E_i)^2}{E_i}$$

Where

O_i = observed or actual value,

E_i = Expected value

E_i is calculated as:

$$E_i = \frac{\text{Row total} \times \text{column total}}{\text{Grand total}}$$

The hypothesis will be not significant and hence accepted if:

Chisquare (calculated) < Chisquare (tabulated). (p>0.05)

The hypthesis will be significant and hence rejected if:

Chisquare (calculated) > Chisquare (tabulated)

RESULT AND DISCUSSION

The data presented in table 1 below represents the profile of respondents.

Table 1: Respondent profile

Profile	Valid	Frequency	%age
Gender	Male	300	50%
	Female	300	50%
Family type	Nuclear family	400	66.6%
	Joint family	200	33.3%
Age (years)	16-19	150	25%
	20-25	320	53.3%
	26-30	100	16.6%
	31-35	25	4.1%
	35-above	5	0.8%
Educational Qualification	Under graduate	200	33.3%
	Post Graduate and above	350	58.3%
	Professional degree	40	6.6%
	Uneducated	10	1.6%
TOTAL		600	100%

On analyzing the data presenting in Table 1 we found that among 600 respondents, 50% were male and 50% were female. 66.6% of respondents were from nuclear families and 33.3% from joint families. 53.3% of respondents were in age group of 20-25 years, 25% were in age group of 20-25 years, 16.6% in age group 26-30

years, 4.1% in age group 31-35 years, 0.8% above 35 years. 58.3% of respondents revealed that their educational qualification is post graduate level or above, 33.3% mentioned that their educational qualification is undergraduate level, 6.6% mentioned that they have

professional degree and only 1.6% of respondents were uneducated.

Table 2 given below represents the cause of drug abuse among the people of Bandipora Kashmir.

Table 2: Cause of drug abuse among the people of Bandipora

Respondent	Unemployment	Frustration	Bad company	Chance use	For fun
Male	45 (15%)	30 (10%)	141 (47%)	64 (21.3%)	20 (6.6%)
Female	43 (14.3%)	27 (9%)	155 (51.6%)	46 (15.3%)	29 (9.6%)
Chisquare = 5.418, df = 4, p > 0.05					

Analysis of the data present in table 2, reveals that majority of the respondents; male 47% and female 51.6% agree that the cause of drug addiction among the people is bad company. Further 21.3% of male respondents agree that cause of drug addiction is chance use, 15% think unemployment, 10% think frustration and 6.6% think that people take drug for fun. On the other hand on examining the response of female respondents

we find that 15.3% of female respondents agree that the cause of drug addiction is chance use, 14.3% think of unemployment, 9% think of frustration and 9.6% agree that people take drug for fun.

Table 3 given below represents the awareness of drug addiction among the people of Bandipora.

Table 3: Awareness of drug addiction among the people of Bandipora

Questions asked	Responses	Total	%age
Do you know what drug addiction is?	Yes	541	90.1
	No	20	3.3
	May be	39	6.5
Is anybody around you addicted to drugs?	Yes	130	21.6
	No	260	43.3
	May be	210	35
What is the reason of drug addiction among the people especially youth?	Unemployment	155	25
	Frustration	105	17.5
	Bad company	310	51.6
	For fun	30	5
Does the friendship quality affect the person who is addicted to drugs?	Yes	400	66.6
	No	50	8.3
	May be	150	25
Is there any roll of friends in saying “No” to drugs?	Yes	550	91.6
	No	10	1.6
	May be	40	6.6
Can bad friendship result in drug addiction?	Yes	460	76.6
	No	35	5.8
	May be	145	17.5
Can failure of love affair results in drug addiction?	Yes	400	66.6
	No	160	26.6
	May be	40	6.6
Are girls also victim of drug addiction?	Yes	540	90
	No	7	1.1
	May be	53	8.8
Do you think government is performing good job in stopping in drug addiction?	Yes	200	33.3
	No	280	46.6
	May be	120	20
Is parental negligence responsible for the addiction of drugs in youth?	Yes	505	84.1
	No	15	2.5
	May be	80	13.3
Who should aware people about drug addiction?	Government	10	1.6
	Religious leaders	10	1.6
	Elder of family members	10	1.6
	Educators	10	1.6
	All of the above	560	93.3
Can social media play a role in stopping drug addiction?	Yes	330	55
	No	130	21.6

Questions asked	Responses	Total	%age
Which age group is vulnerable for drug addiction	May be	140	23.3
	10-20	190	31.6
	20-30	380	63.3
	30-40	18	3
	Above 40	12	2
What can government should do to stop drug addiction?	Launch campaign	130	21.6
	Destruction drive	9	1.5
	Illegal entrance from neighboring countries	21	3.5
	All of the above	440	73.3
What are the effects of drug addiction?	Loss of health	40	6.6
	Loss of wealth	8	1.3
	Loss of social status	2	0.3
	All of the above	550	91.6
Can addicts stop the use of drugs if they have the will power?	Yes	525	87.5
	No	10	1.6
	May be	65	10.8

Analysis of table 3 reveals that 90.1% of the respondents are aware about drug addiction, while as by asking about anybody around them who is addicted to drugs, 21.6% of respondents replied yes while as 78.3% of respondents were with reply No and May be. 51.6% of respondents agree that bad company is responsible for drug addiction, 25% think unemployment, 17.5% think frustration and only 5% think for fun. Similarly 66.6% respondents believed that friendship quality affects the person who is addicted to drugs. While as 33.3% disagree with this statement. 91.6% of respondents depict that good friend can play a great role in saying no to drugs. 76.6% of respondents depict that bad friendship results in drug addiction and 66.6% think that failure in love affair can result in drug addiction. 46.6% of respondents think that government is not doing good job in stopping drug addiction. 84.1% respondents highly agree that parental negligence play a role in the addiction

of drugs in youth. Majority of respondents with 93.3% agree that awareness is a social responsibility and hence religious leaders, government, educators; parents should take seriously part in the awareness programmes. 55% of respondents believe that social media can play an important role in stopping the drug addiction. 90% of respondents believe that girls are also the victim of drug addiction. 63.3% of respondents agree that people in the age group between 20-30 years are more vulnerable to drug addiction. 73.3% of respondents agree that government should launch awareness programmes, destruction drives and illegal entrance from neighboring countries to stop supply of drugs. 91.6% of respondents believe that drug addiction leads to the loss of health, wealth and social status. 87.5% of respondents believe that a drug addicted person can escape from viscous cycle of drugs if he has strong will power. These results are in good agreement with the earlier studies.



Awareness programmes regarding drug addiction held at different colleges and schools of District Bandipora in collaboration with Mission Youth Bandipora during the year 2023

Table 4 given below represents the effects of drug abuse on people

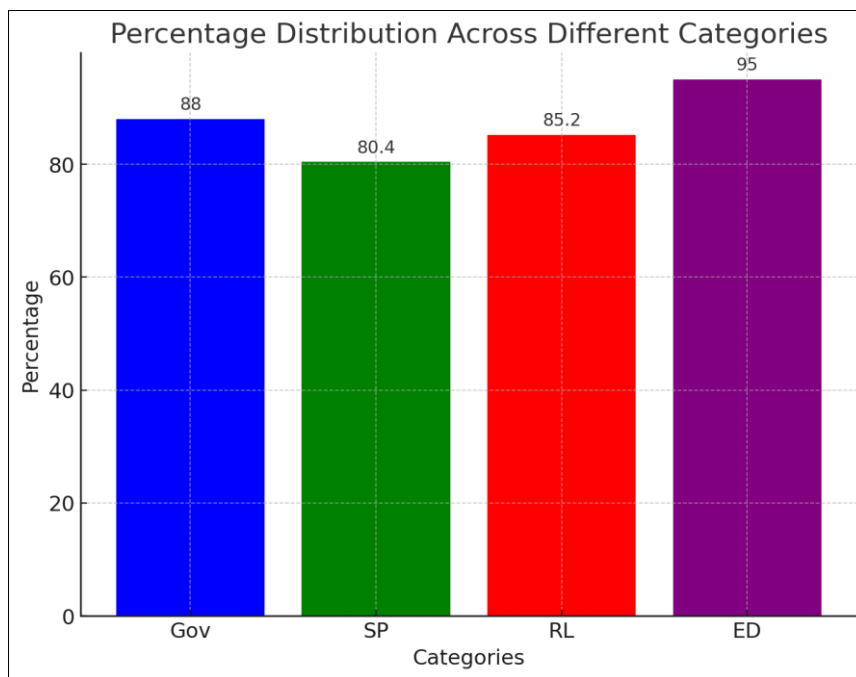
Table 4: Effects of drug abuse on people

Respondent	Loss of health	Loss of wealth	Loss of social status	All of the them
Male	39 (13%)	68 (22.6%)	28 (9.3%)	165 (55%)
Female	45 (15%)	64 (21.3%)	42 (14%)	149 (49.6%)
Chisquare = 4.162, df = 3, p > 0.05				

Analysis of table 3 reveals that 13% of respondents believe that effect of drugs is loss of health, 22.6% believe that loss of wealth, 9.3% believe that loss of social status and majority of male respondents (55%) believe that all the three reasons are effects of drug addiction. Similarly in case of female respondents, 15% believe that effect of drug is loss of health, 21.3% believe that loss of wealth, 14% believe that loss of social status and majority (49.6%) all the three reasons are the effects

of drug addiction. Since our result shows that $p > 0.05$, therefore statistically, there is a no significant difference between the opinion of respondents and hence our hypothesis is accepted.

The data presented in the bar graph below depicts that majority of respondents believe that the important measures should be taken to reduce drug addiction among the people.



GOV = Government, SP = Sports, RL = Religious Leaders & ED = Elders

The bar graph reveals that 88% respondents believe that government deal strictly with drug addicts and people involved in drug supply, 80.4% respondents believe that sports must be promoted among youth to control drug addiction, 85.2% believe that religious leaders should play an important role to control drug addiction by organizing frequent drug addiction awareness programmes and 95% believe that elders should play their role by keeping watch on their members first and then on society.

CONCLUSION

The present study conducted in Bandipora District of Kashmir Valley tries to look at the crucial aspect of drug awareness and vis-à-vis treatment of drug addiction. The study revealed that majority of respondents 90.1% are aware about drug addiction and

shows their concern on seeing increasing the involvement of youth in drug addiction. The main causes of drug addiction as per respondents were unemployment, frustration, bad company, chance use and fun. Statistically, in the opinion regarding main causes of drug abuse among people no significant difference was found ($p > 0.05$). Majority of respondents believe that measures taken to reduce drug addiction are sports promotion, organizing frequent drug addiction awareness programmes by religious leaders, elders should play their role by keeping watch first on their family members and then on society and government should deal strictly with drug addicts and people involved in the drug supply. Since drug addiction is a complex problem and hence cannot be solved overnight. Sustained efforts are required from stake holder's including government, healthcare providers, community organizations and in general wider public to solve this

problem by working together we will be able to tackle this issue and provide the necessary support and resources to those who are struggling with drug addiction in order to make our country drug free.

Suggestions

1. Counseling cells should be brought into existence for youth who suffer from depression, stress and disappointment so that they can be motivated and prevented from drug addiction.
2. Awareness programmes should be organized in Schools, Colleges, Universities and in villages so that youth and youth and young generation gets awareness about ill effects of drugs and how to overcome drug addiction.
3. Elders and religious leaders should come forward and support all people who want to make our country drug free.
4. Police and drug monitoring agencies should be given more power to handle with drug suppliers.
5. Law makers should make laws that strictly banned the drug addiction.
6. Ample number of counselors should be appointed and made available in every school and college.

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