



International journal of basic and applied research

www.pragatipublication.com

ISSN 2249-3352 (P) 2278-0505 (E)

Cosmos Impact Factor-5.960

A study on the root cause of drug addiction in youth with special references to West District Tripura

Jaspal Debbarma, Dr. Alam Ara, Dr. Jahanara

PG student, Assistant professor, Head and professor

Department of social work

Naini Agriculture Institute, Sam Higginbottom University of Agriculture and Technology, UP, India

Received: 10 July Revised: 18 July Accepted: 26 July

Abstract

Drugs and substance abuse de-motivates the students and youth in their academic and learning. Despite the intervention and strategies by the Government, religious organisation, non-state actors and many other NGOs and organisation to stop the problems of drugs and substance abuse especially among the youth, the number of school going and collage youth were more involve into drug abuse and it is increasing more day by day. The purpose of this study is to understand the root cause of deterioration of the society which is directly affected by the drug abusers to his/her family, friend circle and the society, with special references to the youth in rural and urban area of west district, Tripura, India. The research targeted the youth from rural and urban area in west district. Purposive sampling was used for the selection of study area and their respective respondent. A total of 100 respondents have been selected, which is 50 respondents from rural area and 50 respondents from urban area of west district, Tripura using systematic sampling. Questionnaires were used for data collection. Once the data was obtained from the field it was coded and analyses. On basis of the findings, the following conclusions have been made that 96 per cent of the rural respondents take drugs for joy seeking, 92 per cent of the respondents due to teenager curiosity, 92 per cent of the respondents due to friend's offer, 90 per cent of respondents for having free time, 90 per cent of the respondents take drugs due to positive attitude towards drugs abuse, 48 per cent of the respondents due to low cost of drugs, 48 per cent due to presence of addicted person in residential / educational place, 40 per cent due to lack of knowledge about complication of drugs, 26 per cent due to low- self confidence, 26 per cent to eliminate shyness, 4 per cent due to family disputes / relationship disputes.

Keyword- Drug addiction in youth.

Introduction

Drug abuse is a global phenomena found in most countries of the world among youth. Although it covers various age range group, it's mostly common in youth between 18 – 35 years of age. It has been found out that youth of the age range 18 – 25 years were more in number in terms of drug misuse. Unemployment and low level of education also play a role.. Memory losses, school attendance, difficulty in concentration, poor performance are some of the educational consequences in drug abuse. Parents must keep watchful eyes on the movement of their children.



Drug addiction has become a worldwide problem, especially youth people become dependent on different types of substances and stimulating medicines that comes hand-in-hand with narcotic effect. The life of addicts becomes spoiled in all aspects, as they lose contact with their family and lives in a different world. They spend lots of money on drugs, and then look for ways to earn money illegally. If we compare the health problems, there are many dangerous effects of drugs.

Drug abuse among youths rises in TRIPURA, as Drug consumption has been a major problem in the society today. According to the source, youth of 18-30 years of age are addicted to drugs like charas, ganga, along with many addiction tablets and dendrite, phensedyl, corex, heroine, yava, etc. Mostly the students of schools and colleges are affected by the consumption of the drugs. The alarming rate of the drug abuse among youngster has had detrimental effects on the society.

Research methodology

Research methodology is the specific techniques to identify and select information about a topic. Keeping in mind the objectives to understand the problems of drug inflicted youth, descriptive research design was followed for the present study of the research has been kept explorative so that the problems of each respondent could be subjectively carried in the process of research. The design is survey research in which population are studied by collecting and analyzing data from only few people. The population is from Two (2) different categories, i.e. rural and urban area all in west District of Tripura, selected respondents will be interviewed in order to get an average data of the study area. In this study we have randomly selected a total of 100 respondents which is 50 respondents from rural and 50 respondents from urban area. West district is one of the eight districts in Tripura. West district is an administrative district in Indian state of Tripura. The District headquarter is located in Agartala, which is also the state capital. As of 2012 it is the most populous district of Tripura (in 8). The west Tripura district is bounded by Bangladesh in the north and west by khowai district in the east and by Sepaijhjala district in the south. After the formation of four new districts of Tripura state, the total area of the district is 983.63 sq km. Both primary and secondary data were collected in the research for extracting relevant in formations to answer research questions. The study used questionnaires designed by the researcher in consultation with her university advisor to collect information and data from the respondents who were indulged with drugs addiction in the west district of Tripura.

Result and discussion

4.1 Distribution of respondent by the No. of youth involve in illicit drugs

S.N	No. Of youth involve in illicit drugs	Rural		Urban	
		Frequency	Percentage	Frequency	Percentage
1	Drug abuse	41	82	37	74
2	Non-drug abuser	9	18	13	26
3	Total	50	100	50	100

The analysis in table 4.1 shows that 82 per cent of the respondents are drug abuser and 18 per cent are non- abuser from rural area whereas, 74 per cent of the respondent are drug abuser and 26 per cent are non- abuser from urban area.



4.2 Distribution of respondent consume drugs for the first time

S.N	Consume drugs for the first time	Rural		Urban	
		Frequency	Percentage	Frequency	Percentage
1	13 years old or less	2	4	1	2
2	14-17 years old	12	24	19	38
3	18-21years old	24	48	23	46
4	22 years old or above	12	24	7	14
5	Total	50	100	50	100

The analysis in table 4.2 shows that the rural respondents consume drugs for the first time at the age between 18-21 were 48 per cent, 24 per cent were between 14-17, 24 per cent were between 22-25 years, 4 per cent between 13 years or less.

Whereas, for the urban respondents 46 per cent of respondents were between 18-21 years, 38 per cent were between 14-17 years, 14 per cent respondents were between 22-25 years, and 2 per cent of the respondents were between 13 years or less.

4.3 Distribution of respondent by the reason of taking drugs.

S.N	Reason of start taking drugs	Rural		Urban	
		Frequency	Percentage	Frequency	Percentage
1	Teenagers curiosity	46	92	44	88
2	Joy seeking	48	96	46	92
3	Low-self confidence	13	26	12	24
4	Friend's offer	46	92	44	88
5	Having strict parents	0	0	2	4
6	To eliminate shyness	13	26	12	24
7	Low cost of drugs	22	48	21	42
8	Having free time	45	90	44	88
9	Lack of knowledge about complication of drugs	20	40	11	22
10	Positive attitudes toward drug abuse	45	90	44	88
11	Family disputes/ relationship disputes	2	4	7	14
12	Presence of addicted person in residential / educational place	24	48	36	72
13.	Total	50	100	50	100



The analysis in table 4.3 shows that 96 per cent of the rural respondents take drugs for joy seeking, 92 per cent of the respondents due to teenager curiosity, 92 per cent of the respondents due to friend's offer, 90 per cent of respondents for having free time, 90 per cent of the respondents take drugs due to positive attitude towards drugs abuse, 48 per cent of the respondents due to low cost of drugs, 48 per cent due to presence of addicted person in residential / educational place, 40 per cent due to lack of knowledge about complication of drugs, 26 per cent due to low- self confidence, 26 per cent to eliminate shyness, 4 per cent due to family disputes / relationship disputes.

Whereas, 92 per cent of the urban respondents take drugs for joy seeking, 88 per cent due to teenagers' curiosity, 88 per cents due to friend's offer, 88 per cent of the respondents for having free time, 88 per cent due to positive attitude towards drugs abuse, 72 per cent due to presence of addicted person in residential / educational place, 42 per cent due to low cost of drugs, 24 percent of respondents due to low-self confidence, 24 per cent to eliminate shyness, 22 per cent due to lack of knowledge about complication of drugs, 14 per cent due to family disputes/ relationship disputes and 4 per cent of the respondents for having strict parents.

Conclusion

It is concluded that 82 per cent of the rural respondents are active drug abuser and 74 per cent for the urban respondents. The research study finds out that compare to rural area the percentage of urban respondents is lesser because of the economic differences, because majority of the people living in urban area were economically stable and go for cure like consultation with doctors, check up, and rehabilitation like facilities, etc.

A person living in urban area takes more drugs in a single day where 66 per cent of the respondents take drugs more than thrice a day whereas, 48 per cent for the rural. According to the research study the urban abuser gets more pocket money also the income of the urban parents is much higher that the rural parents. Also the main reason is because of the availability and the facility is much easier in urban area.

It is concluded that 48 per cent of the rural respondents are taking drugs for the first time at the age between 18-21 years old whereas, 46 per cent for the urban respondents. This is because the age between 13-19 years age is a age if teenagers where 92 per cent of the respondents take drugs due to teenagers curiosity and 88 per cent for the urban respondents.

Bibliography

1. Pertica and Leary (2011). *Drug abuse definition*, Sixth Edition, Nursing diagnoses.
2. Nutt, D.; King, L. A.; Saulsbury, W.; Blakemore (2007). "Development of a rational scale to assess the harm of drugs of potential misuse".
3. Palen (2013). Drug addiction and drug abuse. In L.S. Goodman & A. Gilman *The pharmacological basis of therapeutics (5th ed.)*.
4. Barrett SP, Meisner JR, Stewart SH (2008). "What constitutes prescription drug misuse? Problems and pitfalls of current conceptualizations".
5. Feidler (2010). "Subtypes of nonmedical prescription drug misuse". *Drug Alcohol Depend* **102** (1-3): 63-70.



International journal of basic and applied research

www.pragatipublication.com

ISSN 2249-3352 (P) 2278-0505 (E)

Cosmos Impact Factor-5.960

6. Antai-Otong, D. (2008). *Psychiatric Nursing: Biological and Behavioral Concepts*. 2nd edition. Canada: Thompson Delmar Learning
7. Chambless, D.L. (1998). "An update on empirically validated therapies" . *Clinical Psychology* (American Psychological Association) **49**: 5–14. Retrieved 2008-03-24.
8. Madan (2014). "Development of a rational scale to assess the harm of drugs of potential misuse". *The Lancet* **369** (9566): 1047–1053.
9. Strohl (2015). Drug addiction and drug abuse. In L.S. Goodman & A. Gilman (Eds.) *The pharmacological basis of therapeutics (5th ed.)*. New York: MacMillan. pp. 284–324.
10. Ahuja (2016). "What constitutes prescription drug misuse? Problems and pitfalls of current conceptualizations". *Curr Drug Abuse Rev* **1** (3): 255–62.