

Assessment of Pattern and Profile of Substance Abuse among Children in Slum Areas of Ahmednagar

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Abstract

Background: We have been facing a frightening rise of substance abuse among the youngsters in recent years. Further, the problem is seen across all socioeconomic groups, from urban areas to small towns. However new substances are being abused which have also been documented. Substance abuse primarily amongst youth has been a matter of concern throughout the world. *Study Design:* It's a descriptive cross sectional study, done in collaboration with NGO (Balbhavan Project) working in slum areas of Ahmednagar. *Duration of Study:* 6 months from January 2016 to June 2016. *Material and Methods:* Considering the time frame for the study, Research was carried out with the help of NGO working in slum areas of Ahmednagar and children fulfilling the inclusion and exclusion criteria. Data was collected with the help of pre-designed questionnaire. It was estimated that the total sample size will be about 246 children who are using substances. (Calculated by open Epi Software). *Observation:* The Result obtained at the end of our study was quite shocking. It was found that in slum area 87% children were drug abusers, among which 83% were boys and 17% were girls. A high correlation of substance abuse was found with increasing age. Most abused substance among them was Tobacco, Alcohol, Inhalants, Sedative and opium.

Keywords: Substance Abuse; Tobacco; Craving; Slum Area; Children etc.

Introduction

We have been facing a shocking rise of substance abuse among the youngsters. Recent times have witnessed a steady increase in drug abuse among younger population, with more children starting substance use from an early age. Further, the delinquent is seen across all socioeconomic groups, from cities to small towns and rural areas, with new and multiple substance use also being recognized [1, 2].

Speedy industrial development with changing lifestyles have left the youth harassed for their survival; compelling many to seek defense in the dark

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Received on 24.11.2016, Accepted on 07.12.2016

world of substance abuse. India too, is fronting a similar condition that has been paying attention of policy makers and researchers [3]. Not only the child, but the family and society as a whole are likely to be disturbed as a result of early onset substance use. Thus, this matter is of nationwide interest and significance. This phase of life is characterized by growth and maturation of brain and body, which potentially affects responses to drugs and treatment.

World Health Organization (WHO) estimates that globally 25 to 90 % of children and adolescents have consumed at least one substance of abuse [4]. In India approximately 5500 children and adolescents start using tobacco products daily, some as young as 10 years old. A large number of them have first used tobacco prior to the age of 18 years [5]. Research on substance abuse among children and adolescents presents its own distinctive challenges. But the main question is that why the Indian society is facing such a quandary where more of the teenagers and youths are indulging in immoral and unproductive activities like substance abuse. The present study has the aim of analyzing the biosocial profile and pattern of

substance abusers. The study is indicative for the need of fostering a supportive environment comprising of both parents and teachers so that adolescents can adopt and sustain with the right choices for a healthy life.

Aims and Objective

1. To assess the pattern and prevalence of substance abuse among Children in slum areas of Ahmednagar.
2. To find out demographic profile of children using substances for abuse.
3. To find out association of family history, peer pressure, educational status of family and children associated with substance use among children.

Methodology

It's a descriptive cross sectional study done in collaboration with NGO (Balbhavan Project) working in slum areas of Ahmednagar. They were evaluated according to pre designed questionnaire in given time frame with the help of NGO (Balbhavan project) working in that area. All the children satisfying the following inclusion and exclusion criteria were enrolled in the study.

Inclusion Criteria

1. Children with age group 18 years or less of either sex were included in study.
2. Children who were willing to participate in research work.
3. Patients / Parent / relative/NGO who were ready to give informed consent.
4. Informed written consent was taken from the child or adolescent and the parent or NGO staff counselor (as a surrogate guardian, in case the parents are not available).

Exclusion Criteria

1. Children with age group below 5 and above 18 years of either sex were not included.
2. A child who was Unable to provide information was not included in the study.

Sampling

During meetings of the study group, it was decided that the non-governmental agencies would be

involved in the collection of data. The NGO involved in collection of data included those working with slum children and substance use. The NGO working with slum children already had a presence in the community. They had established a belief with slum children, as most children reached them when in need and they would be in a helpful position. The NGO working with substance use were acquainted with the process involved in reaching out to substance users and already had many substance users under their treatment. Substance using children also pursued their help from time to time, although the percentage of treatment seekers who were children was less.

Sample Size

Considering the time frame of the research, study was carried out with the help of NGO working in slum areas of Ahmednagar and children fulfilling the inclusion and exclusion criteria which were mentioned above. It was estimated that the total sample size will be about 246 children who are using substances. (Calculated by open Epi Software)

Working Definition

Substance

The substances included in the study were tobacco chewing, cigarette, supari, gutkha, pan masala, solvents, alcohol, cannabis, opium, heroin, cocaine, LSD, etc.

Substance Abuser

In this study any participant who has accepted having used one or more mentioned substances during past 1 year and has been taking it at least once in a week or several times in the previous month was considered to be a substance abuser.

Statistical Analysis

The data was compiled and analyzed using suitable statistical tests as and when required. The information so collected was analyzed by using SPSS software. Chi-square test was used as per the requirement.

Observations

To know the present scenario of substance abuse, we conducted a descriptive cross sectional study,

among 246 children of slum areas of Ahmednagar under the guidance of Snehalay balbhavan project. The result obtained at the end of the study was quit shocking. It was found that in slum areas 87% children were drug abusers, among which 83% were boys and 17% were girls. A high correlation of substance abuse was found with increasing age consisting of 6.1% drug abuser of age group 5-8 years, 15% drug abuser of age group 9-12 years and 78.9% drug abuser of age group 13-18 years. Most abused substance among them was Tobacco, Alcohol, Inhalants, Sedative and opium. When we inquired

about the educational status of parents, it was found that 84.6% of mothers were illiterate and 60.2% of fathers were illiterate. A special emphasis was laid on education of children among which 52% were school going and remaining were engaged in unskilled labor like rag picking, hotel worker, street vending, dhabha and other work. About 77.6% of these children got addicted due to their friends and 17.3% from their family. At the end of our study only 46.3% of them were willing to quit. 50.9% of children were craving for the substances and 38.8% of children got addicted due to peer pressure.

Table 1: Demographic profile of participants

Sr. No.	Variable	Groups	No. of participants (N = 246)	Percentage
1	Sex	Male	191	77.6
		Female	55	22.4
2	Age	5 - 8 years	15	6.1
		9 - 12 years	37	15.0
		13 - 18 years	194	78.9
3	Living arrangement	Home (with family)	191	77.6
		Home (with friends/distant relatives)	55	22.4
4	Mother's literacy	Literate	38	15.4
		Illiterate	208	84.6
5	Father's literacy	Literate	98	39.8
		Illiterate	148	60.2
6	Drug abuse by mother	Yes	197	80.1
		No	49	19.9
7	Drug abuse by father	Yes	207	84.1
		No	39	15.9
8	Work	Student	128	52.0
		Rag picker/Kabadi	29	11.8
		Street level vending	9	3.7
		Dhaba/restaurant/waiter	5	2.0
		Unskilled worker/laborer	13	5.3
		Do not work	30	12.1
		Others	32	13.0

Table 2: Association between age and drug abuse

Age groups	Drug abuse (%)	No drug abuse (%)	Total	Chi-square value	p value
5 - 8 years	6 (2.8)	9 (28.1)	15 (6.1)	41.517	0.000
9 - 12 years	27 (12.6)	10 (31.2)	37 (15.0)		
13 - 18 years	181 (84.6)	13 (40.6)	194 (78.9)		
Total	214 (100.0)	32 (100.0)	246 (100.0)		

As $p < 0.05$, there is significant association between age and drug abuse. Children in the age of 13 - 18 years are more likely to get involved in drug abuse.

Table 3: Association between Mothers involved in drug abuse and drug abuse by the children

Drug abuse by mother	Drug abuse by Children (%)	No drug abuse by Children (%)	Total	Chi-square value	P value
Yes	178 (90.4)	19 (9.6)	197 (100.0)	9.887	0.004
No	36 (73.5)	13 (26.5)	49 (100.0)		
Total	214 (87.0)	32 (13.0)	246 (100.0)		

As $p < 0.05$, there is significant association between mother involved in drug abuse and drug abuse by the children. If the mother is using drugs, there are 90.4% chances of children getting involved in drug abuse.

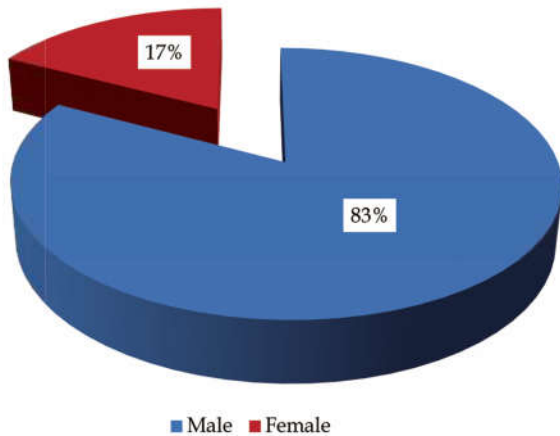
Table 4: Association between Fathers involved in drug abuse and drug abuse by the children

Drug abuse by father	Drug abuse by Children (%)	No drug abuse by Children (%)	Total	Chi-square value	P value
Yes	188 (90.8)	19 (9.2)	207 (100.0)	16.920	0.000
No	26 (66.7)	13 (33.3)	39 (100.0)		
Total	214 (87.0)	32 (13.0)	246 (100.0)		

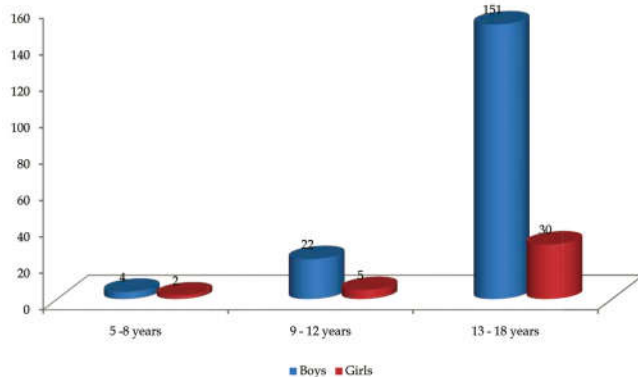
As $p < 0.05$, there is significant association between father involved in drug abuse and drug abuse by the children. If the father is using drugs, there are 90.8% chances of children getting involved in drug abuse.

Table 5: Drug abuse & related parameters

Sr. No.	Variable	Groups	No. of participants	Percentage
1	Substance abuse (N = 246)	Tobacco	140	56.9
		Alcohol	41	16.7
		Inhalant	23	9.3
		Sedative	6	2.4
		Opium	4	1.6
		No substance abuse	32	13.0
2	Want to quit the habit (N = 214)	Yes	99	46.3
		No	115	53.7
3	Procurement of the drug (N = 214)	Friends	166	77.6
		Family	37	17.3
		Itself	11	5.1
4	Difficulty in quitting (N = 214)	Craving	109	50.9
		Peer pressure	83	38.8
		Easily available	17	7.9
		Withdrawal symptoms	5	2.4



Graph 1: Sex distribution among abusers



Graph 2: Age and sex distribution of abusers

Discussion

Substance abuse refers to the harmful or hazardous use of psychoactive substance including alcohol and illicit drugs [6]. The present study reveals the prevalence of substance abuse among children to be 87%, which is higher than that reported by Lisa Sarangi et al [7] where the prevalence was 43.4%. The main route cause for such high prevalence is low socioeconomic group and easy availability of substances.

This study also revealed that the most common substance being abused is the widely available Tobacco (56.9%) which is supporting, the findings of Dharendra N. Sinha et al [8]. Peer pressure, easy availability and affordability were important reasons associated with tobacco initiation and its use.

Prevalence of tobacco use was higher among boys than girls. As boys are involved more in outdoor activities and are subjected to substance abuse. Adolescents reported using tobacco in multiple forms, chewing tobacco being the most popular. The alcohol intake rate was about 16.7% which is lower as compared to the study of Padhy G K et.al [9], where alcohol (68.25%) was the second mostly abused substance.

A WHO study group on youth and drugs (1973) indicated that most of the experimentation and

initiation of dependence-producing drugs takes place during adolescence. Though they had some knowledge about the harmful effects of substances, this was not sufficient to motivate them to quit, in our study only 46.3% were willing to quit. Craving (50.9%) was the most common cause to abstain substance abuse.

Conclusion

The study has emphasized the escalating incidence of substance abuse among slum children in Ahmednagar, pressing need of initiating programs for prevention and treatment in slum areas. The subject needs to be dealt in a comprehensive manner. There is need for availability of specialized treatment services for children who are using substances. These facilities should be available in government hospitals. The settings in which the facilities are delivered should be child sensitive and safe. Treatment programs must attempt to include the family in treatment and address the family issues as a part of the remedy. Rehabilitation of children should focus on skill building and vocational training. Substance abuse by children has detrimental impact on their physical, psychological, social and mental well-being hence needs immediate intervention. Rehabilitation of children abusing illicit substances is the necessity of the hour.

Acknowledgement

Firstly, I would like to express my sincere gratitude to my advisor Dr. Girish Kulkarni (Founder of Snehalaya) and Dr. Hanif for their great support. We would also like to show our gratitude to the Dr. Prithish Raut, Assistant Professor Dept. of Community Medicine for their statistical help. I also thank our respected Principal, Dr. D.P. Joshi, Vice Principal Dr. S.N. Mhaske, Dr. R. K. Padalkar for sharing their pearls of wisdom with us during the course of this research. I thank our Colleague Prateek Shahane, Avani Rajput, Mayuri Kute, Neha Prithviraj, Sayantani Sarkar, Sumit Sarvade and Saumya Rao, who provided insight and expertise that greatly assisted the research.

Conflict of Interest

The author declares no conflict of interest in the present study.

Ethical Clearance

Taken from institutional ethical committee.

Source of Funding

Not applicable.

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