



Behavioural Characteristics Drug Addicts in Rayalaseema Region of Andhra Pradesh

B.Mukunda Naidu

Department of Sociology S.V.University

G.Janakiramaiah

Department of Sociology S.V.University

ABSTRACT

About 190 million people all over the world consume one drug or the other. Drug abuse causes immense human distress and illegal production, distribution of drug has spawned crime and violence worldwide. Illicit drugs include marijuana/ hashish, cocaine (including crack), heroin, hallucinogens. Marijuana was the most commonly used illicit drug. Around 86 percent of the respondents used to feel responsibility towards family matters. Most of the respondents (95.33%) had aggressive behavior to other people. Most of the respondents (94.83%) felt impulsive About 45 percent of respondents drank for the first where during their adulthood i.e. between 20 to 30 years. Majority of the respondents (26.30%) are drinking from 5 to 10. About ¾th(73.80%) of the respondents are consuming alcohol regularly every day Majority of the respondents (93.17%) on taking depressants. There are 74.33 per cent (about ¾th of respondents) of respondent are drinking alcohol in the company of friends.

KEYWORDS

INTRODUCTION

In both Developed and Developing countries, adolescents are facing overwhelming problems viz., High school drop-out rates, Smoking, Alcohol abuse, Drug abuse, Early pregnancy and violence etc., which are making them more vulnerable for life-threatening disease and conditions.¹ Nicotine in the form of Tobacco is the most widely and commonly used drug in the world. Today habit of smoking usually begins during adolescence period because they believe that smoking will boost their social acceptability and image; the overwhelming majority of smokers start using tobacco before the age of 19.2

Worldwide, of 300 million young people who are smokers; 150 million will die of smoking related causes later in life.³ Tobacco can be used in the form of cigarettes, cigars, pipes or smokeless tobacco. Using tobacco at a young age increases the risk of addiction and later creates various health problems including Heart diseases, Cancer and is the leading preventable cause of death in many Developing and Developed countries. About one – quarter of high school students reported having smoked a cigarette before the age of 16 and more than one third of high school students reported smoking cigarettes in the past 30 days. Tobacco smoking is one of the chief preventable causes of mortality in the world, WHO estimated that in Developed countries 26 Per cent of deaths among male and 9 per cent of deaths among female can be attributed to smoking. Use of tobacco currently accounts for 3 million deaths each year worldwide and nearly a third rank among these deaths occur in India alone.⁴

Alcohol impairs both mental and motor functions including hand – eye –coordination. It is particularly harmful since youth consume large amount of alcohol quickly. Alcohol is the substance most often used by adolescents, about 80 per cent of high school seniors reported that, they tried alcohol Fifty per cent of high school students reported that they had at least one drink in the last 30 days and 31 per cent reported having upto five drinks on at least one occasion in the past 30 days. Alcohol abuse can results extreme sleepiness, seizure, difficulty in breathing, extreme low blood sugar values, unconsciousness and death. 5

Illicit drugs are the drugs that are illegal to possess, sell and use. Adolescent drug abuse is one of the major areas of concern in adolescence behaviors. More than 54 per cent of tenth and twelfth grade students had used illegal drugs at some

time in their life such as marijuana, cocaine, heroin, ecstasy, hallucinogen, steroids, and metha amphetamine. The two most common illicit drugs are marijuana and inhalant.⁶ Approximately 6,000 people each day use marijuana for the first time and 64 per cent of the first time user were under the age of 18. Short-term effects of marijuana includes eg: problems related to memory, learning, distorted perception, difficulty in thinking, problem solving and loss of coordination. Inhalants are second most common drugs used by teen. The immediate effects of inhalants were: extreme giddiness, excitement, hallucination, brain damage and death.⁷

The prevalence of drug abuse and dependence on areca nut use in India is increasing rapidly, in the form of consumption of pan masala, especially by the youth. Pan Masala is easily available in both rural and urban area. A study from Delhi reported the prevalence of areca nut use to be 11.74 per cent among high school students and areca nut chewing in this population was equal among girls and boys.⁸ The habits like Smoking, Alcoholism and drug abuse among adolescents can be reduced through the early intervention and harm reduction approaches. Government of India associated with NGOs, Voluntary organizations like National and International agencies has taken many policies and activities to prevent the addiction problems among the adolescents such as National Prevention Programmes, establishment of drug abuse deaddiction centre, prevention centre and tobacco control strategy etc. Community based programmes are beneficial for prevention and control of substance abuse among children and adolescents. Major focus of Primary prevention is by formulating all National Drug Control policies. The purpose of primary prevention is to communicate a message to prevent non-users from starting drug use. Education programmes has to be developed to achieve individual practice of risk reduction behaviours. It is a primary avenue for prevention of smoking, drug abuse and other health related problems among school age adolescents. 9

REVIEW OF LITERATURE

A clinical based observational study from North India on drug dependence in adolescence 1980 to 2005 was conducted. Data on Demographic and clinical features were extracted from available case notes of adolescents patients who presented to the centre during 1980-2005. Results showed that many adolescents came from nuclear family (63.5%), and many of them from urban background (83.5%). Mean age

at first use of the primary substance was 14.8 yrs and mean age at first presentation was 17 yrs. The commonest used primary substances was opioids (76.2%) and opioids with heroin (38.07%), more than half of the subjects (54.2%) were also nicotine dependent at the time of presentation. The most common reason for starting the use of drugs was curiosity (78.8%).¹⁰ A descriptive study was conducted (2004) to assess the prevalence of alcohol, drug use and psychoactive substance consumption among French high school students. Anonymous questionnaire were administered among 1,637 high school student. Results showed that 82.1 per cent of the male and 74.5 per cent of the female French student had already consumed some alcoholic drink. Students were more affected by tobacco addiction in male (22.2%) and females (22.9%). Daily consumption of alcohol and smoking in male and female were 3 per cent & 1.9 per cent. The consumption of psychotropic medicines appeared overall to be less among French high school students.¹¹

A study was conducted (2002) to assess the risk factors of drug abuse among adolescents. This study was carried out on a sample of 254 male senior high school students in New Delhi. The authors found that variables contributing significantly to drug use were: age, heterosexual dating, drug abuse among family members and drug abuse among friends. However, Drug use was not found to be significantly associated with Family Income, Fathers' Occupation, Family Structure and place of Residence.¹² A Study was conducted (2001) about alcohol abuse in a rural community in selected part of India. Results showed that about 50 per cent of both sex, used drugs and alcohol were aged between 15 to 17 years. Country liquor was the beverage used by 85 per cent of male students. 77.5 per cent of males and 96.5 per cent of females consume less than one quarter of bottle of alcohol. 4.2 per cent were social drinkers.¹³

STUDY AREA

The Rayalaseema region, consisting of the districts of Chittoor, Kadapa, Anantapur and Kurnool, occupies 27.4 per cent of the State area and lies mostly at an altitude of 1,000 to 2,000 feet above the mean sea level. The average rainfall of this region is approximately 68.5 cm compared to about 104.1 cm for the Coastal Andhra. Long known as a famine belt, Rayalaseema is the most sparsely populated and economically the most vulnerable part of Andhra Pradesh. The soil is rocky and unyielding and the rainfall is scanty and uncertain. Confronted by frequent famines and draughts, farmers struggle for existence. Majority of the population in Rayalaseema still clings to agriculture due to the lack of opportunities in the secondary and tertiary sectors of the economy. This region has fabulous forest resources and sizeable mineral deposits, but these assets are slow in being exploited. Industrially, the Rayalaseema region is the most backward in the state, although Kurnool district has textile operations and a modest food processing industry. The climate in Rayalaseema is mostly dry. The maximum temperature varies from 37 C to 44 C. Consequently, this area received very low rainfall during the South West and the North East monsoons as well. Red soils predominate in this zone.

METHODOLOGY

Sampling technique

Cluster random sampling technique will be used to select the study area. To select the sample Purposive Non – Random sampling technique will be used.

Sample size

Sample size of present study comprises totally 600 students who were in the age group of 20 -60 years in selected rural and urban areas of four districts of Rayalaseema

RESULTS AND DISCUSSION

Sample size

The sample of the study has been presented in the Table 1

Table 1

Native district of the respondents

District	Urban	Semi Urban	Rural	Total
Chittoor	288	33	55	376
	48.00	5.50	9.20	62.70
Kadapa	75	29	47	151
	12.50	4.80	7.80	25.20
Anantapur	9	0	3	12
	1.50	0.00	0.50	2.00
Kurnool	21	13	27	61
	3.50	2.20	4.50	10.20
TOTAL	393	75	132	600
	65.50	12.50	22.00	100.00

The table shows the district wise and region-wise distribution of the respondents. More than 50 per cent (62.70%) represent Chittoor district followed by 25.20 per cent Kadapa district, only 10.20 per cent and 2.0 per cent respondents represent Kurnool and Anantapur Districts respectively. The region-wise analysis shows that 48.0 per cent of urbanites from Chittoor district followed by 12.50 per cent from urbanites of Kadapa district. The data shows that there are more number of respondents from Chittoor district especially from urban areas. The deaddiction centre from where the data collected is located in Tirupati city of Chittoor District which is an urban centre.

Positive behaviour

The positive behaviour of the respondent during childhood of the respondents has been presented in the Table 2.

Table 2

Positive behaviour of the respondent during childhood

Sl. No.	Behavior	Frequency	Percent
1	Feeling responsibility	513	85.50
2	Good Academic Records	189	31.50
3	Extra Curricular Activities	199	33.17
4	Interpersonal relationship	352	58.67
5	Total	1253	

The table 2 shows that positive behavior of the respondents during this childhood. Around 86 percent of the respondents used to feel responsibility towards family matters. 31.50 per cent preferred good academic records, 33.17 percent were very active in extracurricular activities and 58.67 percent of respondents had very good interpersonal relationship with the family and people of the society.

Negative behaviour

The negative behaviour of the respondent during childhood of the respondents has been presented in the Table 3

Table 3

Negative behavior of the respondents during childhood

Sl.No.	Type of Negative Behaviour	Frequency	Percent
1	Aggression to people	572	95.33
2	Property destruction	486	81.00
3	Lying	376	62.67
4	Theft	144	24.00
5	Rule violation	88	14.67
6	Scholastic backward	168	28.00
7	Gambling	434	72.33
	Total	2268	

Table 3 presents the negative behavior of the respondents during their childhood. Most of the respondents (95.33%) had aggressive behavior to other people followed by 81 per cent used to destruct the property of the house as well the society whenever they get angry. 62.67 percent of respondents used to lie to escape from blames. 28 percent were lagging in their studies and absconding to schools. They also had the bad habits such as thieving, rule violation and gambling

for stake etc. there habits are the indicators. That in future such people enter into bad habits.

Antisocial behavior

The antisocial behaviour of the respondent during childhood of the respondents has been presented in the Table 4

Table 4
Antisocial behavior during the intake of drug

Sl.No.	Type of Antisocial Behaviour	Frequency	Percent
1	Failure to conform to social norms	413	68.83
2	Deceitful	504	84.00
3	Impulsivity	569	94.83
4	Irritability and aggressiveness	529	88.17
5	Reckless disregard	442	73.67
6	Constant irresponsibility	197	32.83
7	Lack of regrets	104	17.33
	Total	2758	

Note: Multiple Responses

The table 4 presents the antisocial behavior of the respondents during the intake of drug. Most of the respondents (94.83%) felt impulsive followed by 88.17 percent are irritable and aggressive. The others also had deceitful nature (84%), reckless disregard (73.67%) failure to conform to social norms (68.83%) constant irresponsibility (32.83%) and lack of expressing regrets (17.33%) generally these are the qualities of the habitual drug addicts.

Age at which the respondent drunk alcohol

The age at which the respondents started drinking alcohol is presented in the Table 5.

Table 5
The age at which the respondent drunk alcohol for the first time

Sl.No	Age	Frequency	Percent
1	Below 10 years	8	1.30
2	10-20 years	257	42.80
3	20-30 years	271	45.20
4	30-40 years	53	8.80
5	40-50 years	11	1.80
	Total	600	100.00

The table 5 explains the age at while for the first time the respondents drank alcohol. About 45 percent of respondents drank for the first where during their adulthood i.e. between 20 to 30 years, but 42.80 percent of respondents drank while they are in between 10 or 20 years while is too early for then on they might had free occurs to alcohol. Still there is another significant note is that 1.30 percent of respondents even drank alcohol when they are below 10 years. This may be because of the bad company they had surrounding them. Only 1.80 percent of respondents drank alcohol in later ages i.e. between 40 and 50 years.

Drinking alcohol without problem

The information on how long the respondents drunk alcohol without problems has been elicited and the details are presented in the Table 6.

Table 6
No. of years the respondents drinking alcohol without problem

Sl.No.	Time without problem	Frequency	Percent
1	0 – 5 years	155	25.80
2	5 – 10 years	158	26.30
3	10 – 15 years	102	17.00

4	15 – 20 years	76	12.70
5	20 – 25 years	71	11.80
6	25 and above years	38	6.30
	Total	600	100.00

The table 6 indicates the period of drinking of alcohol by the respondents. Majority of the respondents (26.30%) are drinking from 5 to 10 years followed by 25.80 percent of respondents drinking from less than 5 years. But 6.30 percent of respondents are drinking alcohol since more than 25 years.

Frequency of alcohol intake

The frequency of alcohol intake by the respondents has been shown in the Table 7.

Table 7
Frequency of alcohol intake by the respondents

Sl.No.	Frequency	Frequency	Percentage
1	Everyday	443	73.80
2	Everyday	94	15.70
3	Weekly	17	2.80
4	Fortnight	46	7.70
	Total	600	100.00

The table 7 presents the frequency of intake of alcohol by the respondents. About ¾th (73.80%) of the respondents are consuming alcohol regularly every day followed by 15.70 percent taking alcohol weekly once. Only 2.80 percent of respondents are taking alcohol once in every fortnight.

Company of the respondents while drinking

The company with whom the respondents consume alcohol has been resented in the Table 8.

Table 8
Company of the respondents while he drink

Sl.No.	Member	Frequency	Percentage
1	Alone	288	48.00
2	Friends	446	74.33
3	Family members	52	8.67
4	Relatives	93	15.50
	Total	869	100.00

Table 8 shows that respondents company with whom the take alcohol. There are 74.33 per cent (about ¾th of respondents) of respondent are drinking alcohol in the company of friends followed by 48 percent on drinking alcohol alone. Only 8.67 percent of respondents are drinking alcohol along with their family members.

Classification of drugs used

The drugs the respondents used have been classified and shown in the table 9.

Table 9
Classification of drugs used by the respondents

Sl.No.	Type of Drug	Frequency	Percentage
1	Depressants	559	93.17
2	Narcotic analgesics	36	6.00
3	Cannabis	21	3.50
4	Stimulants	481	80.17
5	Hallucinogens	1	0.17
6	Inhalants	14	2.33
7	Substance not classified	36	6.00
	Total	1148	

Note: Multiple Responses

Table 9 given the classification of the drugs used by the respondents. Majority of the respondents (93.17%) on taking de-

pressants followed by 80.17 percent taking stimulants. Only minimum percent of respondents are taking Hallucinogens (0.17%), inhalants (2.33%), canobis (3.50%) and Narcotic analgesic (6.0%). From the above it can be concluded that the depressants and stimulants are early available to the respondents in the market.

CONCLUSION

The prevalence of drug abuse and dependence on areca nut use in India is increasing rapidly, in the form of consumption of pan masala, especially by the youth. Pan Masala is easily available in both rural and urban area. Around 86 percent of the respondents used to feel responsibility towards family matters. Most of the respondents (95.33%) had aggressive behavior to other people. Most of the respondents (94.83%) felt impulsive. About 45 percent of respondents drank for the first time during their adulthood i.e. between 20 to 30 years. Majority of the respondents (26.30%) are drinking from 5 to 10. About 3/4th (73.80%) of the respondents are consuming alcohol regularly every day. Majority of the respondents (93.17%) are taking depressants. There are 74.33 per cent (about 3/4th of respondents) of respondents are drinking alcohol in the company of friends.