



**SUBSTANCE ABUSE AMONG SCHOOL CHILDREN:  
A STUDY IN ANDHRA UNIVERSITY HIGH SCHOOL,  
VISAKHAPATNAM OF ANDHRA PRADESH**

**P. Sailaja**

Research Scholar  
Department of Social Work  
Andhra University, Visakhapatnam

**Prof. K. Visweswara Rao**

Professor  
Department of Social Work  
Andhra University, Visakhapatnam

Substance abuse is one of the serious problems affecting youth in the world. The increasing problem of substance abuse and dependence has drawn both public and scientific attention to be focused. Although the present knowledge concerning substance abuse and dependence is far from complete, investigating them as maladaptive patterns of adjustment to life's demands rather than as moral deficiencies is leading to rapid progress in both understanding and treatment of substance abuse.

The earliest records contain not only references to human familiarity with alcoholic beverages but to a variety of other psychoactive substances that affect mental processes. Hallucinogenic substances were made from a variety of mushrooms by Paleolithic people in Siberia and Far East to induce cheer, intoxication, and courage during tribal clashes. These substances used apparently had many of the effects of modern hallucinogenic substances. The introduction of various substances such as Manikchand, khaini, 5000 Gutka, Panparag etc which have an addictive nature have been increasingly used.

Substance abuse and dependence may occur at any age, but seem to be most common during adolescence and young adulthood. Though research in this area is sparse on Indian population is sparse, a number of studies have been reported in other countries especially United States of America and Europe. An attempt is made to present a brief description on overview of these studies here under.

**Review of Studies**

Adolescent age generally begins at the age of 13 or 14 years and continues upto 21 years. The most important aspect adolescents' adjustment is concerned with emotional problem. The family plays a significant role in the development of personality. Shamuddin (1986)

Analyzed the effects of some of the better-known family. A study conducted by XU and Jiangmin (2003) indicated that family background characteristics and parental involvement indeed make significant effect on adolescent deviance. On the whole, the results provide encouraging evidence that parental involvement is one way to reduce students' deviant behavior. As Bhattacharya and Gauri (1998); Brody (2000); Flower and Frieda (2003) examined the intergenerational conflict as a precursor to alcohol, tobacco, and other drug use among second generation Asian Indian adolescents. Bahr,



Maughan et al. (1998) discussed the structural equations model to estimate adolescent drug use. Parental monitoring had relative weak effects on adolescent drug use. The influence of these risk factors was similar for both females and males.

Malow-Iroff and Micheline (2001); Dbkin and Frank (1995); Jenkins (1996) stated that the sibling and best friend relationships during pre-adolescence as an element in the social context within which expectancies about cigarette smoking and alcohol drinking develop. Results indicated that the prediction of positive expectancies and elements of normative influence impact on males and females differently. Eysenck's (1957) basic premises are that we are born with tendencies, to behave in certain ways. In large part, these tendencies determine whether will be intelligent or stupid, introverted or extroverted, neurotic or stable. Charles (1972); Hoffman (1983) defined drug as any chemical substance of agent that affects the physiological, psychological and social functions and is taken for comfort, stimulation or pleasure. While looking at the incidence of drugs, it is important to remember that substances like tranquilizers, alcohol, nicotine, opium and cocaine are freely used in socially acceptance ways, not only for relieving anxiety and tension but also for a change of pace.

A study by Chen and Anthony (1999) suggested a possible interaction between depressive symptoms and perceived cognitive competence. Alcohol related problems developed earlier for youths reporting both lower perceived cognitive competence and depressive symptoms relative to those with no depressive symptoms and high-perceived cognitive competence. Further more, among children with at least one depressive symptom, low or moderate perceived cognitive competence is associated with doubling the risk of developing alcohol related problem relative to those with high cognitive competence. The evidence does not support a strong association between perceived cognitive competence and later alcohol-related problems. An exploratory search for interactions disclosed a possibility that depressive symptoms and poor perceived cognitive competence might combine to foster subsequent development of alcohol related problems.

Dechenla Tsering et al. (2010) attempts to look into assess the knowledge regarding harm of use and to obtain information about attitudes among high school students. Also, to discover the opinion of substance use held by users. The study conducted in two high schools of West Bengal, India, among 416 students, in classes VIII, IX, and X, with no interventions. Primary outcome measurements were substance use: knowledge regarding harm, attitude, and opinion. Following this proportions and the chi-square test were used for statistical analysis. The results show that out of 416 students, 52 (12.5%) used or abused any one of the substances irrespective of time and frequency in lifetime; 26 (15.1 %) were among the urban students and 26 (10.7 %) were among their rural counterparts. More than two-third (73.07%) of the respondents expressed a desire to quit substance use and 57.69% had tried to stop. 'Easy availability' and 'relief from tension' were the most frequent reasons for



continuation of substance use. Level of knowledge on harmfulness of substance use among students was very high (urban - 84.6% and rural - 61.5%) and they stated media as the most frequent source of information. Users were successful in influencing their peers into taking up this habit (urban - 15.4% and rural - 26.9%). In spite of being aware of the harmful effects of substance use, adolescents take up this habit.

### **The Importance of the Study**

Substance abuse is harmful not only to the individual but also to family and society at large. When substances are taken for reasons other than medical, in an amount, strength, frequency or manner that damages the physical or mental functioning of an individual is called Substance abuse. Substance abuse and dependency on substances are most common during adolescence. India is certainly facing a serious problem dependency on account of Substance. School going adolescents are attracted to Substances because of 'thrill' and 'enjoyment', whereas, underprivileged students get hooked up to them to escape from unhappy, harsh parental values, uncongenial home atmosphere and poor interpersonal relationships and other negative factors.

The problem of substance abuse has been aggravated in the recent past because of complications caused by a number of factors. Earlier the consumption of substance in a specific community was determined by the availability of the Substance in that area and its culture. Now there is a change in trends of substance abuse. Easy availability of manufactured Substances such as Khaini, Panparag, Deluxe, 5000, etc. have further complicated the problem of the Substance abuse.

Addiction to substances is spreading every where like an epidemic and eroding social and cultural fabric of society by becoming a root cause of poor academic performance, truancy and ill health.

### **The objectives of the study were:**

1. To study the socio - economic profile of the high school going children addicted to substances like Panparag, Manikchand, 5000, Khaini etc.
2. To examine their family background, and impact of the substances on their habits.
3. To find out the type of substances used, reasons etc. by school children.

### **METHOD**

#### **The study area:**

The study was conducted in Andhra University High School Visakhapatnam Andhra Pradesh. Originally the school was started to meet the primary education needs of Andhra University employees and the school is presently catering to children other than University employees. A majority of the children coming from lower socio-economic groups whose parents are illiterate and casual labourers.



### Universe and Sample

The size of the universe i.e, the total number of children abusing substances is not known as it is done confidentially. Hence, after establishing rapport with the children through a series of interviews, the researcher gained the trust and confidence of the children. Snow ball sampling method consist of 100 children 87 male and 13 females who are abusing the substances are selected for study.

### Tools for data collection

The investigator used an interview schedule for data collection. It has many questions both open and closed ended. Broadly the areas covered in the schedule are. Identification details, Family background, Use of Substances, Peer influence and other interactions, Interaction with the community, Parental influence and control and Health status. The pilot study was conducted on 10 addicted children and necessary changes were made in the schedule as per the out comes of pilot study.

### RESULTS AND DISCUSSION

Multiple substances were used in this study by the largest 60.0% of adolescent followed by 5000, Manikchand, pandparag, khaini, Deluxe etc., It is found that 72.0% among friends of substance abuse has been noticed. While 75.0% showed friends are habituated to Khaini, Alcohol, 5000, Panparag etc. It is observed that 90.0% of the respondents are meeting outside school to take substance. Majority 78.0% of the respondents' academic performance is poor and 89.0% of the respondents' teachers are not aware of their habit. Majority 75.0% of the respondents reported impact on their academic performance. It is observed that substance abuse adolescent have disturbed academic performance and health, less adjustment in family members and good adjustment with peer group.

**Table-1**  
 Distribution of Respondents by their Socio Demographic data

Variables	Percentage
<b>Sex</b>	
Male	87.0
Female	13.0
<b>Age (in Years)</b>	
Below 12	10.0
12-16	77.0
Below 18	13.0
<b>Caste</b>	
Scheduled Caste	60.0
Backward Caste	25.0
Other Caste	15.0
<b>Religion</b>	
Hindu	82.0
Christian	16.0
Muslim	2.0
<b>Class</b>	
VI th	19.0
VIII th	30.0
IX th	26.0
Xth	25.0



Personal information on substance abuse showed that 87.0 percent boys 13.0 percent girls. It indicated that majority of the respondents' fall in the age group of 12-14 years. This is an important stage in the development of the personality. Being subjected to addiction during this period would lead to personality maladjustment. With regard to their caste background, a majority hail from scheduled caste community. Most of the respondents are Hindus and they were reflecting the composition of various religions groups in the general population.

### Family Background

Background data on substance abuse with respect to the level of parents, education showed that 57.0% father and 70.0% mother illiterates. Type of the family, a vast majority (90.0%) belonging to nuclear families. Two-fifth (40.0 per cent) are living in pucca houses. Regarding parental occupation, it is observed that majority of respondents take substances parents who are under class IV (61.7%). about two-fifth of the respondents are working as sweepers. Income reported having most (60.6 percent) of the respondents parents are getting monthly income is between Rs. 2000 to Rs. 5000. Educational statuses of the parents are illiterate. While 65.0 percent respondents of their fathers use substances.

**Table-2**  
Distribution of Respondents by their type of substances and habits

Nature	Percentage
<b>Type of substances</b>	
5000 Gutka, Khaini and Panparag	60.0
Deluxe	40.0
<b>Habits</b>	
Smoking	58.0
Alcohol causes	22.0
<b>Habits of Friends</b>	
5000, Khaini, Deluxe and Manikchand	13.0
5000	1.0
5000, Alcohol, Panparag	86.0

Data presented in Table-2 show that the respondents are involved in multiple substance use. All the respondents reported having other habits such as smoking and drinking and friends of the respondents are multiple substance users.



**Table-3**  
 Distribution of Respondents by their person who initiated them into substance use

Variable	Percentage
<b>Initiator</b>	
Friends	72.0
Friends and people older to them	16.0
Brother	6.0
Parents substance use	6.0
<b>Who were their friends</b>	
Both class mates and outsiders	76.0
Only Classmates	18.0
Only Outsiders	6.0

Table –3 A majority 72.0 percent of the respondents initiated by their friends. Regarding their friends a majority 76.0 percent are reported by both class mates and outsiders. The same observation was also made by Malsow-Iroff and Micheline et al.(2001) is their study on the influence of siblings and close friendships on early cigarette and alcohol experiences. The respondents are having classmates and out siders as their friends. The influence of outsider seems to be strong on the respondents substance use.

#### Place and time of taking

In the study, most 47.0 percent of the respondents are taking substance during leisure time. About half 49.0 percent of the respondents are particular time of taking in a day. 24.0 percent of the respondents are taking during school time. About two-fifth (44.0 percent) of them reported are that they meet near the school either in the school play ground or their friends houses.

**Table-4**  
 Distribution of Respondents by the sources of money

Source of monely	Percentage
Parents	70.0
Parents, friends and relatives	12.0
Theft	4.0
Earning by working	4.0
Friends	3.0
*Others	16.0

\*Others consists of Theft and playing coin games, working and saving on the purchase of provisions and saving money by buying reduced quantity of provisions when parents send them to the shop to purchase them etc.



Table-4 information shows that the respondents theft money from the parents to buy the substance. The parents may not be giving money exclusively for buying substance. Respondents are earning money on their own through different methods like theft and by saving on the purchase of provisions for the family without the parents' knowledge.

**Table-5**  
 Distribution of Respondents by reasons for taking substance

Reasons	Percentage
For happiness	36.0
To pass time	25.0
To enjoy, time pass, curiosity, courage and happiness.	16.0
To pleasure, overcoming depression, peer influence, want to be peaceful etc.,	13.0
For enjoyment	10.0

It can be observed from Table-5 that such as for happiness, for time pass, for enjoyment, curiosity, courage, happiness, for causing substances getting pleasure, overcoming depression because of peer influence, to want peace and taken when parents beat them.

**Table-6**  
 Distribution of Respondents having friends older to them

Details	Percentage
<b>Friendship with people older to them</b>	
Present	53.0
Absent	47.0
<b>Age of Older friends (in years)</b>	
14 – 16	30.2
17 – 19	49.0
19 and above	20.8
<b>Type of problem</b>	
Being called nick names such as eunch /Thief etc.,	66.7
Always talks about Romance	33.3

Table-6 shows respondents' having friends older to them. Influence of the other friends on the substance use, behaviours of the respondents and older boys initiate them into substance use behaviour.



### Use of substances by their parents

The parents of the respondents are also using substances uses. Most (65.0 percent) of the respondents are reported that they have only father. The percentage of respondents' parents uses all type of substance like, Alcohol, Khaini, Deluxe, Cigarette, panparag, 5000 etc., (13.0 percent). About one – third (32.1 percent) of the respondents' father are taking all substances. Only 2.4 percent of respondents' mother reported the use of tobacco.

**Table-7**  
 Distribution of Respondents by their attendances to school and impact of school environment

Variables	Percentage
<b>Regularity in attendance to school</b>	
Present	52.0
Absent	48.0
<b>Impact of school environment</b>	
When beaten by teachers	87.9
When discouraged by sirs	9.1
Called nick names	3.0
<b>Academic performance</b>	
Poor	78.0
Below average	19.0
Average	3.0

Table -7 reveals that the respondents become no interesting to school and they become truant. Eventhough, respondents don't attend classes and they and spend time in the school surroundings and play game. Further they start at home for school, reach the school but don't attend classes and after the long bell go back home. This lack of regularity to school. As Alan and Amtizes (2003) pointed out be because of substance often replaces school as the central focus of their lives. The school environment impacts the substance use behaviours of the respondents and use substances when beaten by their teachers. More than three fourth of the students are academically poor. A study conducted by Chen and Anthony et al. (1999) which indicated that respondents habituated to substances have poor academic performance. Further as they are truant their academic performance will be expectedly poor.

### Impact of substances

About half (50.9 percent) of the respondents reported lips becomes black and have pain in eyes. When asked about the psychological impact for the respondents for their feel, 10.0 percent reported having drowsy.

### Type of change

About half (52.4 percent) are by changing in academic performance. Coming to the health change of the respondents, most (46.3 percent) of the respondents having stomach pain.





## CONCLUSION AND SUGGESTIONS

Substance abuse and dependency are most common during adolescence. India is certainly facing a serious problem on account of substance addiction. School going adolescents are attracted to substance because of 'thrill' and 'enjoyment', and under privileged students get hooked up to substances to escape from unhappy, harsh parental values, uncongenial relationship and other negative factors such as parental laxity over the use of alcohol and substances, school environment, peer influence and other interactions with community are said to be responsible for taking substances. So it is important to identify adolescents' views pertaining to knowledge and awareness of substance use, social situations, substance risk, social image effects of substance abuse on their lives, knowledge and abilities pertaining to substance use and short and long term effects on health beliefs in relation to substances.

## REFERENCE

1. Alan David and Amtzies (2003). A smart, angry and out of control: A study of how teens with drug and alcohol problems re-learn school. Unpublished Ph.D. dissertation submitted to Boston college.
2. Bahr, Maughan et al (1998) "Family, religiosity and the risk of adolescent drug use", *Journal of Marriage and Family*, Vol 60, 979-992.
3. Bhattacharya Gauri (1998). "Drug use among Asian Indian adolescents: Identifying protective/risk factors". *Adolescence*, 33(129), 169-184.
4. Brody, Arias et al (2000). "A longitudinal analysis of internalization of parental alcohol use norms and adolescent alcohol use". *Applied Developmental Science*, Vol 4, 71-79.
5. Charles, R.(1972) *Drug Abuse*: Saint Louis: Bosby Company.
6. Chen – Li- Shun and Anthony (1999) "Perceived cognitive competence, depressive symptoms and the incidence of alcohol-related problems in urban school children". *Journal of child and adolescent substance abuse*, vol 8, 37-53
7. Dinkin and Frank (1995) Individual and peer characteristics in predicting boy's early onset of substance abuse: A seven year longitudinal study *Child Development*, 66(4) 1198-1214.
8. Dechenla Tsering, Ranabir Pal, Aparajita Dasgupta (2010) Substance use among adolescent high school students in India: A survey of knowledge, attitude, and opinion. Department of Community Medicine, Sikkim Manipal Institute of Medical Sciences (SMIMS) and Department of Community Medicine, All India Institute of Hygiene and Public Health, Volume : 2 (2) pp.137-140.
9. Eysenck H.J.(1957). *The dynamics of anxiety and hysteria*. London: University of London Press.
10. Fowler and Frieda (2003) "Do as I say and not as I do!" Adolescent alcohol



- use: The impact of parental attitude and behaviors. Unpublished Ph.D., dissertation submitted to the University of Nebraska-Lincoln, p 89.
11. Hoffman, F.G. (1983). *A hand book on drug and alcohol abuse*. New York: Oxford University Press.
  12. Jenkins, etal (1996) the influence of peer affiliation and student activities on adolescent drug involvement. *Adolescence*, 31(122), 297-306.
  13. Jenkins, etal (1998). The relationship of family structure to adolescent drug use, peer affiliation and perception of peer acceptance of drug use. *Adolescence*, 3 - 811-822.
  14. Malow – Iroff and Micheline Susan (2001) the influence of siblings and close friendships on early adolescent cigarette and alcohol expectancies. Unpublished ph.D., dissertation submitted to City University of New York, p 139.
  15. Shamuddian, A. (1986). Handle the delicate flowers with care. *Social Welfare*, 33(II), 14-16.
  16. XU and Jiangmin (2003) A longitudinal study of the effects of the parental involvement on adolescent deviant behavior Unpublished Ph.D., dissertation submitted to Brigham Young University, p 157.