SUBSTANCE ABUSE IN INDIA: A CRITICAL ANALYSIS

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Abstract: Although drug use among high school students and household members has decreased in recent years, high rates of substance abuse among arrestees, homeless people, and school dropouts, as well as an increasing trend in the number of drug-related hospital emergency room incidents, suggest that substance abuse has not decreased among some populations. A variety of risk factors have been identified in prospective longitudinal studies that consistently predict a higher incidence of substance misuse. Individuals who are exposed to several risk factors and few protective influences during infancy, childhood, and early adolescence are most likely to abuse substances later in adolescence and early adulthood. Efforts to minimize risk and strengthen protective variables across various domains show promise for successful substance addiction prevention in high-risk groups. Through this paper an attempt has been made to study the trend of the escalating problem of substance abuse in India and its social impact.

Index Terms - Substance abuse, family, risks, adolescence or youth and social impact.

I. INTRODUCTION

The identification and discrimination of substance abuse usage in a country is an important and integral issue. The development of remedial and corrective measures to curb the menace of drug users remains the top public health priority for a nation. Today the changing face of the society with easy access to almost everything has made the use of drugs a common problem but the issue aggravates when it is to be combated for societal emancipation. This critical issue does not have a target audience as it can engulf an entire community in one gallop. Thus, it has become imperative for the world polity to devise and disseminate empirical measures to correct and treat the substance abuse victims to ensure a standardized and sustainable societal order (Rowe and Liddle, 2003)

There are several factors and causes that lead to the use of substances, specifically embedded in teething issues of the family life and relationships. More precisely family problems such as broken families, poor parenting skills, lack of proper communication in the family, exposure to hostile environment, debilitating family structures, peer pressure, too much exposure to internet, negative communication, abusive relationships, etc. have proven again and again that the use of drugs is directly proportional to the structure of family in the societies. Thereafter, in any given milieu it is imperative for the government to ensure that the treatment of substance abuse must be centered on the family structure. Also, special emphasis needs to be given to emancipate the culture of structured family which can foster strong and sustainable relationships.

India, as a country has though entered a phase of digitalization, wherein, everything in India has entered into a reformatory and developing terms, especially through the tool of digitalization. Technology and digitalization have become an inseparable part of everyone's lives. In the field of education, digitalization and technology are also quite essential. The programme comprises responsibilities aimed at ensuring that citizens have access to digital government services, as well as to the most up-to-date information, technical connections, and innovation. As the Y-Generation is comfortable with modern equipment like computers, laptops, iPads, and cellphones, introducing technology into the classroom makes them feel at ease. To promote learning and concept access, technology can be employed in a variety of ways.
However, this picture has for millennia; the use of mood-altering psychoactive substances has been a feature of human society. In India, a wide range of alcohol and other psychoactive chemicals are examples of psychoactive substances, namely, Cannabis and opiates have been used for a variety of purposes for countless years. However, in today's world, the frequency and scope of such use of psychoactive substances has become popular proportions that are pathological.

1.1 THE INDIAN SCENARIO

Despite the fact that the usage of various psychoactive substances such as alcohol, cannabis, and opioids has been seen in India for quite some time, the current the extent and frequency with which psychoactive substances are used as well as the issues that come with their use the situation is not well recorded. When there isn't any knowledge on the subject that is both reliable and detailed there has been a drug abuse problem in the country for a long time formulating and implementing a challenge strategies and programmes that are effective in addressing usage of drugs; henceforth, the government is working to close the gap.

As a result, evidence on the level of usage of psychoactive chemicals (often known as "drugs") is critical and as a result, National policies are based on evidence-based studies. Owing to the federal character of the India's governance, and in light of that, it is critical that a multi-stakeholder process be used to handle drug concerns. Estimates of this nature are available at the national level as well as at the state or local level.

2. OBJECTIVES OF THE STUDY

The study was undertaken to accomplish the following objectives

a) To study the pattern of drug abuse in India
b) To analyze the social impact of substance abuse

3. METHODOLOGY

This paper is based upon conceptual analysis. Therefore, the data has been collected from secondary sources namely journals, books, working papers, articles, government documents and internet sites.

4. FINDINGS

4.1 Cannabis and opioids are the second most often used substances in India after alcohol. Approximately 2.8 percent of the population (3.1 million) claim to have used cannabis at some point in their lives within the previous product year. Cannabis was widely used. Further distinguishes between cannabis in its legal form (bhang) and other illicit substances cannabis-based products (ganja and hashish) (charas). The use of cannabis about 2% of the items were found to be defective for bhang (about 2.2 crore people) and approximately 1.2 percent (almost 1.3 crore).

States with the highest prevalence of charas are Uttar Pradesh, Punjab, and Haryana are among the states with the highest rates of cannabis consumption. Opium (or its forms such as poppy husk known as doda/phukki), Heroine (or its impure form – smack or brown sugar), and a range of pharmaceutical opioids are used by about 2.1 percent of the country's general population (2.26 crore individuals). Heroine (1.14 percent) is the most often used opioid in the United States, followed by prescription opioids (0.96 percent) and Opium (0.52 percent). The states with the highest rates of opioid use include Sikkim, Arunachal Pradesh, Nagaland, Manipur, and Mizoram. Sikkim, Chhattisgarh, and Delhi are three states in India with a high prevalent substance use.

According to the report, a significant percentage of people take sedatives and inhalants. Sedatives are used by about 1.08 percent of Indians aged 10 to 75 (about 1.18 crore persons) (non-medical, nonprescription use). Sikkim, Nagaland, Manipur, and Mizoram have the greatest rate of current sedative use. However, the top five states with the highest numbers of sedative users are Uttar Pradesh, Maharashtra, Punjab, Andhra Pradesh, and Gujarat. Inhalants are the only type of substance for which children and adolescents have a greater prevalence of current usage (1.17 percent) than adults (total prevalence 0.7 percent) (0.58 percent). Other types of drugs, such as cocaine (0.10 percent), amphetamine-
type stimulants (0.18 percent), and hallucinogens (0.12 percent), are used by a small percentage of the population
(Ministry of Social Justice and Empowerment, 2019).
This analysis demonstrates that a significant portion of India's population is impacted by substance use problems and
requires immediate assistance. The scope of national substance abuse treatment programmes, on the other hand, is
woefully inadequate.

4.2 Drug misuse is a multifaceted issue with social, cultural, biological, geographic, historical, and economic implications.
The breakdown of the traditional joint family system, the lack of parental love and care in modern families where both
parents work, the decline of traditional religious and moral values, and other factors have resulted in an increase in the
number of drug addicts who use drugs to escape the harsh realities of life.

The kind of the drug abused, the individual's personality, and the addict's surrounding environment all play a role in drug
use, misuse, and abuse. The conventional systems of social control have loosened as a result of industrialization,
urbanisation, and migration, leaving an individual open to the pressures and strains of modern life. Synthetic substances
and intravenous drug use, both of which lead to HIV/AIDS, have given a new dimension to the problem, particularly in
the Northeastern parts of the country.

Drug addiction has had a negative impact on society. It has resulted in an upsurge in crime rates. To pay for their
narcotics, addicts turn to criminality. Drugs lower inhibition and impair judgement, encouraging people to engage in
criminal behaviour. Teasing, group fights, assaults, and impulsive murders are all on the rise as a result of drug misuse.

Addiction raises tensions and causes tremendous emotional agony for every family member, in addition to harming
financial stability. The loss of human potential is immeasurable because the majority of drug users are in the productive
age bracket of 18-35 years. The impact on youth's physical, psychological, moral, and intellectual development is
significant.

Addiction-related increases in HIV, hepatitis B and C, and tuberculosis cases contribute to the community's reservoir of
infection, burdening the health-care system even more. Drug misuse is more prevalent among women in India. Domestic
violence and HIV infection, as well as financial hardship, are among the repercussions.

Thus, at both the national and international levels, India has prepared to meet the threat of drug trafficking.

5. CONCLUSION

The alarming rise in juvenile substance usage highlights the urgent need to address the problem. Because the role of the family
and school is so important in breaking this habit, school-based programmes can be implemented to raise awareness about the
potential health risks.

Teachers can be given educational materials about substance usage and its adverse effects, which can then be included into the
school curriculum. Counseling sessions for adolescents may assist pupils in revealing familial concerns and taking preventative
actions.

Students should be given awareness training beginning at a young age to avoid them from developing these hazardous practices
during puberty. Provide youth parents with awareness training so that negative family influences can be reduced and parents can
be on the lookout for instilling these practices in their children

6. REFERENCES

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