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EFFECT OF DRUG AND SUBSTANCE USE IN ADOLESCENTS IN SOCIAL DEVELOPMENT

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Abstract: Data from the National Institute on Drug Abuse (NIDA) and the Centers for Disease Control and Prevention (CDC) reveal high numbers of adolescent substance use in the United States. Substance use among adolescents can lead to increased risk of transmission of sexually transmitted infections, vehicular fatalities, juvenile delinquency, and other problems associated with physical and mental health. Adolescents are particularly susceptible to involvement in substance use due to the underdeveloped state of the adolescent brain, which can lead to reduced decision-making ability and increased long-term effects of drugs and alcohol. Understanding the causes of adolescent substance use is vital for successful prevention and intervention programs.

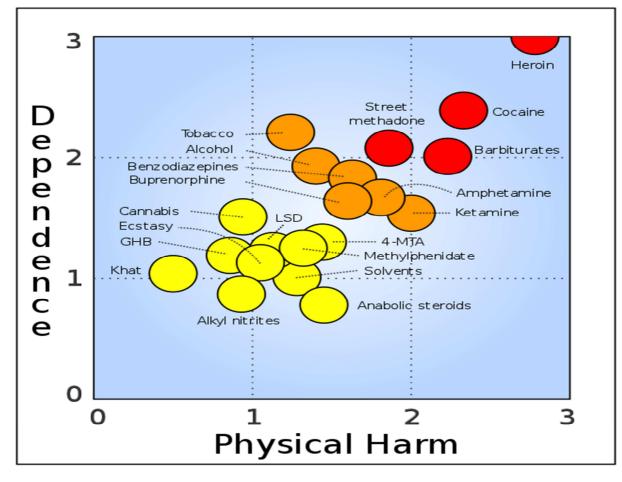
Keywords: *drug, substance, adolescents, effects, health, prevention, control.*

INTRODUCTION

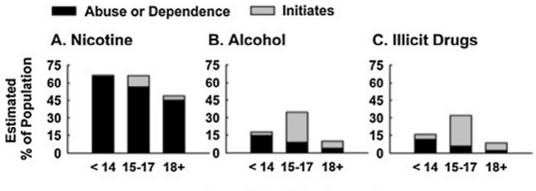
Adolescent substance-related attitudes and use patterns have evolved over time, informed by adult and peer behaviors, public policy, media messaging, substance availability, and other variables. A number of risk and resiliency factors contribute to individual differences in substance use and related consequences. Advances in observational techniques have provided enhanced understanding of adolescent brain development, and its implications for substance use. Prevention efforts have yielded mixed results,[1] and while a number of adolescent-targeted evidence-based treatments for substance use disorders have been developed, effect sizes are generally modest, indicating the need for further research to enhance prevention and treatment outcomes. Substance use in adolescence is heterogeneous, ranging from normative to pathological, and can lead to significant acute and long-term morbidity and mortality.



Understanding risk and resiliency factors, underlying neurobiology, and optimal developmentally-sensitive interventions is critical in addressing substance-associated problems in adolescence. Every year, the International Day against Drug Abuse and Illicit Trafficking is celebrated on June 26 with the aim to sensitise individuals and communities around the challenge of drug abuse and addiction as well as its impact.[2] With this global observance, individuals, communities and numerous organizations aim to not only raise awareness to fight against substance abuse but also strengthen comprehensive action and collaboration to achieve the aim of a global society free of drug abuse.



The epidemic of substance abuse in adolescents is increasing at an alarming rate in India and this is the direct result of the changing cultural values, fierce competition in the fields of education and employment, growing economic burden on families and declining supportive bonds for adolescents in this transitional age. The impact is that adolescents witness their first experimentation towards various drugs, especially those that are easily available including glues, tobacco, cannabis, and alcohol. Amongst adolescents,[3] the highest at-risk population include street children, child labourers, and teens who have a family history of drug abuse and other emotional and behavioral challenges at home.

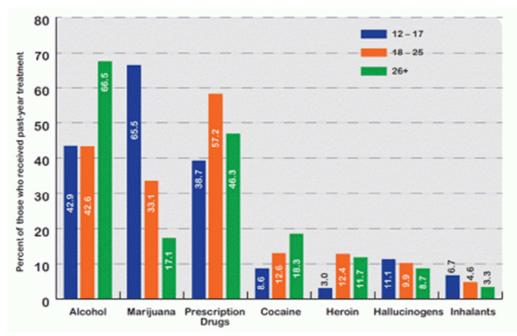


Age at First Use (years)

According to a study conducted by the National Commission for Protection of Child Rights, the most common form of substance abuse amongst adolescents is tobacco and alcohol, followed by inhalants and cannabis. The average age of onset of tobacco use was observed to be as low as 12 years, while another study revealed that 46% of slum dwelling adolescents started both smokeless and smoking tobacco, as well as alcohol and cannabis from childhood [3] With easy access to smokeless tobacco, studies in slums of Delhi have shown the age of initiation to be as low as 6 years [4]

Discussion

Data collected under project UDAYA, an initiative led by the Population Council, the Bill and Melinda Gates Foundation and the Packard Foundation, shows that substance abuse is high among adolescent boys (15-19 years).

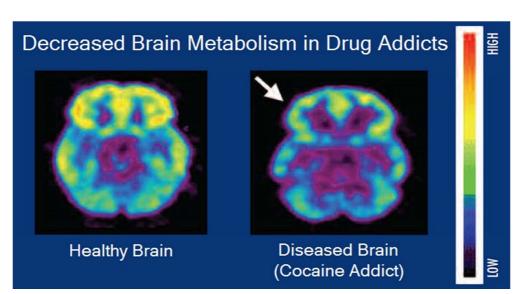


The UDAYA study probed on tobacco use, alcohol consumption and drug use and revealed that 20% of adolescent boys aged 15-19 in Bihar and 22% in Uttar Pradesh (UP) consumed tobacco and tobacco products; 4-5% of younger boys (10-14 years) also ever used tobacco products. The consumption is higher among rural boys in comparison to urban boys (21% vs 17% in Bihar; 23% vs 18% in UP). One percent of older boys (15-19 years) in Bihar and UP reported use of brown sugar (a heroin product) cocaine, ganja, charas and bhaang [5]



Regarding alcohol consumption, the figures were 8% (in Bihar) and 5% (in UP) for older boys whereas 2% younger boys in Bihar have been found to consume alcohol. Tobacco consumption among married older girls (15-19 years) was found to be higher (2% in Bihar and 5% in Uttar Pradesh) in comparison to younger girls (10-14 years; 1% each in both states) and unmarried older girls (2% in each states). Percentage of unmarried girls involved with drug abuse was 0.1% while none of the married older (15-19 years) and unmarried younger girls (10-14 years) and boys (10-14 years) reported using any drug ever. [6]

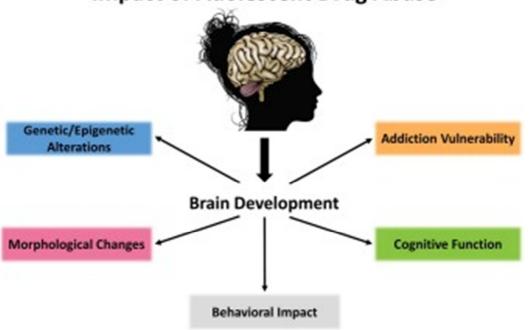
The effect of substance abuse is highest on the psychological health of adolescents with the possibility of developing substance use disorder, leading to major behaviour changes observed, including mood disorders, depression, anxiety, thought disorders such as schizophrenia, as well as a personality disorders like antisocial personality traits. Use of tobacco (nicotine) in adolescence and young adulthood poses a unique risk for long-term and long-lasting effects on developing brains as nicotine changes the way synapses are formed, harming the parts that control attention and learning. Brain continues to develop until about the age of 25 years and during adolescence, the brain growth is not complete and is susceptible to the damaging effects of tobacco smoke. Consequences of substance abuse also include quarrels with friends, family or relatives, as well as accidents and severe health disorders, with some also losing their jobs or dropped out of school due to poor performance. One study reported that three percent of adolescents who used substances were also involved in criminal activities like petty thefts, burglary, vandalism of public and private property amongst others [7]



Intervention programmes for substance abuse should have a two-pronged approach that caters to both the prevention and treatment of drug abuse. Prevention programmes should focus on addressing initiation of various drugs. The interventions must be aimed at younger age groups, focusing on before the usual age of initiation. Effective enforcement of substance abuse policies like tobacco control act can efficiently curb access of these products to adolescents. One of the major contributors to such prevention programmes apart from teachers should be parents of at-risk youth and adolescents. Such interventions should focus on psychosocial development than only prevention of target drug use as it has the potential to improve various aspects of a person's development. Regular parental monitoring, supervision, and enhanced child-parent communication can act as preventive measures towards substance abuse. Efficient parent training with family skill building, and structured family therapy can prevent illicit drug use.

Results

This paper has addressed some prevalent familial, social, and individual risk factors for adolescent substance use.



Impact of Adolescent Drug Abuse

Through the course of this paper, several areas that may require further research have become apparent. First, though some data exist regarding the effects of emotional abuse on adolescent substance use, the strength of research is lacking when compared to that of physical and sexual abuse. Though physical and sexual abuse have been more directly linked to risk for substance use, the effects of emotional abuse (including witnessing violence) should not be overlooked. Secondly, much of the literature focuses exclusively on factors leading to the use of cigarettes and alcohol, especially when discussing peer influences . However, because rates of marijuana use, synthetic marijuana use, and prescription drug abuse are increasing, it will be critical to focus research specifically on these areas in addition to alcohol and tobacco use, which are both on the decline among adolescents . Finally, though there is value in national samples of data, there is a lack of research pertaining specifically to subregions. Localized studies, especially related to demographic factors, may be more effective in generating results that are specific to particular areas and thus may be more useful in generating and assessing local prevention and intervention efforts.[8]

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