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Substance abuse among Teenagers: A Research Review

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Abstract

The aim of the present study to find of substance abuse among Teenagers. For the present investigation Review research method was used related research paper was studied and analysed on the basis of research review discussion and conclusion was drown. Alcohol, tobacco and inhalants are described as gateway drugs, whichsupposedly cause users to move on to harder drugs. In case of street children andmigrants children it was observed they usually start with tobacco products then getinto inhalants, alcohol and move onto harder drugs like Ganja, Charas, Heroin,Opiods etc. (Benegal V et al., 1998; Malhotra C 2007, Pandit, A. 2007)

Background of the study

Teenagers are representative the bright future of that nation. The WHO estimates that globally 25% to 90% children have used at least any onesubstance of abuse during their childhood days (Kushal Singh, 2013). India is home to the highest number of child population in the world around 440 million out of which 243 million are adolescents constituting over 20% of the population of India. It is estimated that out of total adolescent population, 54% belong to 10 -14 year age group. Recent times have witnessed a gradual increase in substance use among younger population, with more people initiating substance use from an early age. While rave parties have

increasingly come to attention, the use of various licit and illicit substances among the school students, out-of-school children and street or homeless population is also on the rise. Further, the problem is seen across all socioeconomic groups, from metropolitan cities to small towns and rural areas, with newer substances and multiple substance use also being documented. Early initiation of substance use is usually associated with a poorprognosis and more serious impact on health, education, familial or socialrelationships. Substance use may lead to behavioural problems, relationship difficulties and may cause disruption in studies and even dropping out of school (Vinod Kumar T et al., 2013). At times, anti-social behaviours e.g. lying, stealing, pick pocketing etc., may occur in association with early onset of substance use.

Substance abuse and teenagers

This research presents a review of selected literatures related to this study regarding teenagers to use substances.Many research papers focused in different aspect of substance abuse among teenagers bellow some research reviews present. Children at the younger age group between 12 - 14 years use of substance is reportedhigher. Due to these factors children tend to dropout from school and they are unableto continue their studies.Adidela, P. R.,at all.(2014). study reported that friends and parents also cause for childrentaking to drugs. The children self-esteem and personality development is also influence children, Aneela. A, (2013).Research indicated that majority (75%) ofthe adolescents initiated substance use at the age of 13 - 15 years with a peak at 14 yrsof age (48.6%). Children start using substance for fun in the begging and latter itbecomes a habit. Parents also a major contributing factor for children using substancealong with their peers.Anees, A., Najam, K., &Zulfia, K. (2009).findings revealed that nicotine use was found to be common by more than 52.9%. Alcohol, tobacco and tranquillizers along with analgesics are the common substances of abuse. Adolescents from nuclear families were (63.8%). Majority (76%) of the respondents used substance abuse for curiosity for the first time. Nearly half of the subjects had positive family history of drug dependence (40.2%). The mean age at first use of the primary substance was 14 years,Anil, B. (2011).Reported that early initiation to substance use is associated with continuation of use and addiction. Substance use among them is high and so is the prevalence of symptoms of mental health problems,Anil Kumar, K., &Reshmi, R. S. (2014).

Study indicated that children in the early adolescence period (33%) were predominantly involved in substance abuse followed by middle adolescence (25%). The mean age of initiation of substance abuse was 10 year and earliest age of initiation was 8 years. The less than half (46%) of the children dropout from their studies before 5thstandard, more than one ten (14%) of them drop from studies before 8th standard. More than one third (36%) of the children were not worked on a paid job and (63%) of the children worked on part time job. The Major risk factor for substance was peer pressure (55%),Anjanamurthy,et.,all(2015).study findings indicated that less than half (47%) of the respondents used substance on curiosity. There is a significant difference in gender with greater use of alcohol and drugs in males than females.Anthony, N. (2014).

Study reported that nearly half (43.3%) of them stated that at least one of their family members was a tobacco user whereas proportion of students whose friends were tobacco consumers was 55.2 percent. It was found that 35.7 percent of the students had ever tried tobacco and 21.2 percent students were current users. Peer pressure, academic pressure and unawareness about hazards of tobacco were found in 38.4 percent, 46.8 percent and 71.7 percent of the students respectively. Adolescents who had at least one parent using tobacco were more likely to be tobacco users as compared to those whose parents were non-tobacco users (adjusted OR=1.7, 95% CI:0.8-3.6). Students whose friends used tobacco were more likely to use it as compared to those whose friends were non-users (adjusted OR=3.4, 95% CI: 1.7-6.7). Peer pressure (adjusted OR = 4.8, 95% CI: 1.9-12.0) and unawareness about hazards of tobacco use were (adjusted OR=1.7, 95% CI: 1.1-3.10) significantly while academic pressure was insignificantly (adjusted OR=1.3, 95% CI: 0.5-3.2) associated with tobacco consumption.Awasthi et al., (2010).

Also smellier research findings indicated that the mean age of boys and girls was 12.18 (2.62) and 11.35 (2.28) years, respectively. Nearly half (46.25%) of the respondents were using variety of the substances. A very high proportion of males reported substance abuse as compared to females (84.8% versus 15.2% respectively). cigarettes and pan masala were chief substances abused by the children studied (10% each),Ayub, T. (2017).Research finding expressed that two fifth (20.6%) of the respondents stated that the substance was very easy obtained by them for use. Around 682 (40.8%) reported knowing classmates who are users, more than one third (37.10%) responded peer pressure being the reason for abuse, Males showed asignificantly

higher risk of being a user as compared to females. The odds of being a user significantly increase with increasing age. Higher the father's education, the risk of being a user decreases significantly, but no such relationship is observed with mother's educational level. Ever users are significantly more likely to come from joint families as compared to nuclear family and being a user is significantly more likely to know classmates who were also users,Bishwalata, R., &Raleng, I. (2014).Related results reported that minimum age at starting substance use was 5.5 years. Less than half (43.5%) of the respondent's family using substance and 42.6 percent of them were residing in nuclear family. One fourth of them used Glue, Petrol, Gasoline, Thinner and Spirit. The harmful effects were lung problems (28.2%) like "burning of lungs" and tuberculosis (6%), some stomach ailment like stones, ruptures and blood vomiting (12%). Substance use was significantly associated with domestic violence, maltreatment of the child, nuclear families, running away from home and working status of the child, Deepti, P., Meena, G. S., Singh, M. M., &Renuka, S. (2003).Research results found that more than one fifth (21%) of the respondents were smoking tobacco, alcohol were 12.2 percent, ganja 2.5 percent. The main reason for continuation of drugs (66.8%) for pleasure, more than one tenth (14.7%) of them were taking substance for fun, 30.2 percent were got information through television. Majority (81%) of the male respondents reason of starting drug abuse were peer pressure,Din Prakash, R., Namita, &Chaturvedi, R. M. (2010).

Related research study findings indicated that tobacco, alcohol and drug use among adolescents are significantly associated with socio-demographic factors, peer and parental behaviours. Study found that lower socio economic status was associated with higher prevalence of smoking among female and male adolescents. Parental smoking is an important source of vulnerability to smoking initiation among adolescents and risk behaviour related to substance use were more frequent among adolescents whose parents were also smokers. Among the study subjects who had ever tried smoking (84.81%), (134/158) tried tobacco at the age of 10 or more and the rest (15.19%) tried smoking at less than 10 years of age. The mean age of initiating tobacco smoking was 12.58 years (SD-2.21). The risk behaviour of substance user also depends on socio demographic peer and parental factors. Among the social factors, low educational status of father emerged as significant in this study ($x2 = 16.32$),Geethadevi et al., (2014).study findings reported that prevalence of substance use increases rapidly from early to late

adolescence, peaks during the transition to young adulthood and declines though the remainder of adulthood, Sanjeeva, G. N., at all.(2015).

Study reported that most respondents (70.5%) had heard consequences of health by substance abuse, (32.3%) did not know the consequences of smoking a single cigarette. One third of the participants rated their knowledge of substance abuse as "very good". Students believed that the main sources of information regarding substance abuse were parents and relatives (48.5%),Haddad, L., at all.(2010).Study findings indicted that majority (82%) of the respondents belongs to Hindu religion, Islam (12%), Christian (2%) and others (4%). One fourth (25%) of the respondents were influenced by peers, (23%) of the respondents reported that they had strong curiosity towards drugs use, Himakshi, G. (2015).study reported that smoking was significantly associated with age, place of stay, duration of stay and type of work. Alcohol consumption was observed to be significantly associated with age group, duration of street life and type of work they, while ganja smoking was significantly associated with age, place of stay and duration of street life,Indrapal, I. M., (2015).Results indicated that children were aged between 16 - 19 years. Majority (80%) of the participants belonged to the family income range of Rs.8,000/- to 10,000/-. Two third of the boys and half of the girlswho were the participants had a family member with a substance abuse problem,predominantly in the father, followed by the older brother. (70%) of the participants had their education up to 8th Standard, (20%) with education level up to 5th standard and (10%) had no formal education at all. The youth identified some factors responsible for the substance abuse problem: unemployment, family conflict, easy availability of substances, peer pressure and associated behaviour like criminal activities in the locality, pick pocketing, theft etc. It was reported that most of the users had initiated substance use due to peer influence, curiosity and sense of feeling grown up. A significantly higher proportion of substance abusers were found to be belonging to joint family structure, had parental abuse status at their Homes, Poor employment opportunities, Illiteracy and were school dropouts. The youth also discussed that Tobacco, Beedi, Cigarette, Supari, Gutkha, Pan, Pan Masala, Solvents, Alcohol, Cannabis, Opium, Heroin, Cocaine etc. were the main substances used by the youths. It was clear that difficulties and stress leads to distress which caused increased risk of drug abuse in the absence of social attachment, development and poor coping strategies, Jahanara, G. M., &Himanshu, K. S. (2015).

Study findings indicated that family size and education status on the part of the father were significantly negatively associated and higher family income was significantly positively associated with age of first use. There was an increased risk for a longer duration of use associated with lower family income, some schooling on the part of the father, no schooling on the part of the mother, father's history of substance use and no family history of substance use. Duration of use of any psychoactive substance for more than 1 year was reported by (77%), all children indicated that they had engaged in criminal activity, with (82%) reporting using criminal activity to support their substance use, with mean age of first crime at 13.3 years (SD = 2.5. More than half (55%) of the respondents mothers and 43 percent of fathers were reported to be illiterate. Hindu was the reported religious preference of 98 (62%) with the remaining 61 (38%) children indicating Muslim,Jones et al., (2016). study findings showed that mean age of all the students was 14.8 years (SD =1.13). Nearly half (49%) of the students started chewing between 13 and 14 years. Majority of the boys (65.75%) first came to know about these substances from their friends while most girls (66.7%) came to know about it from their family members. More than one tenth (14.7%) of the children were using Cannabis for felt mood elation, 6.6 percent of the respondents were using relief from tooth ache, Joseph, N., Nagaraj, K., &ShashidharKotian, M. (2010).

Discussion

Substance abuse is very serious problem in all over word. Teenagers worse their life and time in lots of bad habits and many types of substance abuse.

In the present research review I found that teenager turn to use addition for pleasure, relief from stress and also felling excitement.

Substance abuse get bad effects on teenagers mental and physiological health .many research shows this facts. According related research study revealed that age range for the adolescents was 15 to 18 years old and the mean scores 22.16 for males and 15.86 for females, which indicates that females were having poor mental health. The difference in the mean scores of the two groups were also found statistically significant ('t' value was found 5.47). The male were highly vulnerable to involve in drugs abuse. Result shows that mental health as a strong

predictor of drug abuse among the street children as the standardized regression value (0.48) was found to be statistically significant, Sardana, S. (2015).And also next research study is to identify factors associated with adolescent alcohol or drug (AOD) abuse/dependence, mental health and co-occurring problems; as well as factors associated with access totreatment. This is a secondary analysis of data from the National survey on Drug Use and Health (NSDUH) 2000. The 12-month prevalence ate of adolescents with only mental health problems was 10.8%, 5.1% had only AOD abuse/dependence only, and 2.7% had co-occurring problems. Approximately 15% of youth reported receiving behavioural health treatment in the past 12 months. Several factors associated with having behavioural health problem and receivingtreatment are presented, Erin L. Wistanleyet.,all.(2009)

Research also focus on why teenagers turn to addiction and what are the psychological and environmentfactors responsible for addiction. Regarding research study reported that parents took drugs in front oftheir children, majority of the students 290 (85.3%) agreed compared to 50 (14.7%) who disagreed. This means that students were not given antidrug use advice, they simply modelleds drugs users since they were not guided by their parents on how to avoid the menace. Easy availability of drugs within home and school surroundings also influenced students to abuse drugs. Exposure to media with drug content also influenced students to abuse drugs, Mucheru, M. C., &Katamba, P. (2016).

Many research focused on sociological factors responsible for substance abuse. Child parents' relationship also parenting and environment also effect on increased substance abuse.

Conclusion :In this study conclusion is that Environment and parent's behaviours are over neglecting or over protectiveness and also some parents use substance abuse so children also inspired to take alcohol, smoking , cigarate, bidi, ganja etc.

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