Review article

Substance Abuse among Kashmiri People: Modern Era and Consequences.

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INTRODUCTION

The problem of substance addiction among the youth of Kashmir is a bigger challenge other than terrorism, unemployment. Besides, it’s not limited only to male youth but has also grapple the female youth. No one can deny the fact that drug addiction can not only affect the addict individual alone rather creates a misery to all the family members even the community as a whole. There are number of risk factors which have been correlated to serious substance abuse in youth. The presence of parents or other relatives with substance abuse in the family is the most crucial factor. Lack of achievement, especially in school and poor self-esteem correlates with substance abuse. The aggressive and impulsive teenager is at higher risk of substance abuse. Parental separation, divorce and disturbed family relationships and peer drug use increase the likelihood of the adolescent’s drug problem. Other factors are social isolation, violence, vandalism, and hostility. In addition to individual characteristic, social environment plays a significant role in making an individual vulnerable to drug addiction especially the family. Family is considered the basic socializing agent that influence the development of child’s personality and if family does not functional adequately the individual feel anxious frustrated, isolated, dissatisfied, insecure or even hostile towards family members. such atmosphere in the family at times drag a person towards drug addiction.

Additionally, a wide range of dysfunctional behaviors can...
result from drug abuse and interfere with normal functioning in the family, the workplace and broader community. Untreated substance abuse adds significant costs to families in the form of domestic violence, property crimes, child abuse and neglect, reduced productivity and even unemployment. Its complex but treatable disease. Drug addiction has many symptoms and hence it’s called Drug Syndrome. These people try to be more rebellious and oppose conventional social and traditional values.

There is no clear parameter where we can draw conclusion when drug abuse may conventionally transfer into drug addiction. Each person’s body and brain are different and people also react differently to drugs. Some love the feeling the first time they try it and want more while as others hate it and never try again. Not everyone who uses drugs become addicted but it can happen to anyone and at any stage. some things may risk your chance of addiction including family history, early drug use, mental disorder, troubled relationship, peer pressure, stress, undue-academic stress, easy availability, socio political conflict and over pampering attitude.

There are different signs and symptoms of substance abuse like aggressive and assaultive, irritability, withdrawn, sudden change of friend circle, change in sleep pattern, sudden change in appetite, poor academic performance, physiological changes, loss of interest, trouble in doing normal things, approaching more than one doctor for same problem, financial difficulties, secrecy and solitude, taking risks and problem with risk. Drug addiction is not much clear because different people reach drug addiction at different stages. The ongoing scientific investigation is aimed at knowing the factors that contribute to this transitive period of drug abuse and drug addiction. Drug addiction on the other hand is defined a complex neurobiological disease that requires integrated treatment of the mind, body and spirit. The drugs that may be addictive target your brains reward system. They flood your brain with a chemical called dopamine. This triggers a feeling of intense pleasure, so you keeping taking the drug to chase that high. It considered a brain disease because of drug changes brain like by changing its structure and function. Addiction is chronic, it’s progressive and left untreated it can be fatal. So, we can say it defined as continued compulsive use of drug in spite of their adverse health, social and emotional consequences. Once a person become addicted to drugs, he loses his control over drug use and often become isolated from family and friends. They can also face difficulty at work and school and sometimes leads them to indulged into crimes. once he became addicted the all-time focus will be in getting drugs either by hook or by crook and at times if he did not get it there will be craving and withdrawals ranging from moderate to severe. Craving simply means a strong or overpowering desire of getting particular drug. Our physiological mechanisms generate these cravings to maintain a state of equilibrium that relies now in these drugs. These cravings have a physiological mechanism as they stimulate the area of brain (Amygdale) that controls the emotional memory of addicts. While as withdrawal means signs and symptoms occurring when a substance is reduced or stopped after persistent usage. The nature, time of onset, and course of the symptoms vary from different substances.

Once a person became drug addict there occurs a change in all domains of human personality like mental, physical, emotional, social, occupational, behavioral and psychological and all changes are dependent on the amount and quantity of drug abused. One of the first change which occurs due to this drug abused mechanisms is on tolerance. Which means increased doses of the psychoactive substances are required in order to achieve effects originally produced by lower doses. Drug addiction also makes people vulnerable to other health risks e.g. Inhalant abusers are having high risks of heart problems like disruption of heart rhythms and heroin abusers may have high risk of HIV by sharing infected needles and also prone to Hepatitis B and C.

Drug abuse destroys a number of human lives. As for the World Drug Report of 2019,[14] released on 26 June by the united nations office on drugs and crime (UNODC) 35 million people worldwide suffer from drug use disorders while only 1 to 7 receive treatment, Besides it was stated that Hepatitis C and opioid use disorder are responsible for most of the deaths and disabilities attributed to use of drugs. In the year of 2017 an estimated 271 million people or 5.5% of the global population aged 15-64 years had used drugs in the previous year. More some 43.4 million people worldwide had used opioids in the previous year, 56% higher than the estimate for 2016 and approximately 585,000 deaths have also seen in 2017.

Overall, North America continues to be the sub region with the highest annual prevalence of opioid use, with 4.0% of the populating using opioids. The North and Middle East and South-West Asia is the sub region with the highest prevalence of opiate use (Opium, Morphine and Heroin) at 1.0% of the population. However, in terms of numbers of users, 35% of the global opioid users and half of the opiate users worldwide reside in South Asia.
With the new information from India and Nigeria, the number of people who are thought to suffer from drug use disorders is now estimated 35.3 million. So, this scenario presenting a grim situation and there is increasing involvement of youth, irrespective of their socio economic and cultural strata. The narcotic trafficking and production are also on the rise. India tops on the list of opium producers in the world or medicinal purpose .it produces about 400 Metric tons of Opium Per Annum. The International Bureau of Narcotics (I.B.N) reported that the narcotics trade in the India involves around Rs.5000 crore per annum. Above One million people consume heroin, two million are opium users and several million drug addicts worldwide and India alone has between one to four million.

Drug abuse in Kashmir

As per details from Census 2011, Jammu and Kashmir has population of 1.25 Crores, of which male and female are 6,640,662 and 5,900,640 respectively, and making it the 19th most populous state of India [1]. The state is located in the northern part of the country and forms the northern boundary of the country. Drug abuse among youth in Kashmir is very high and has create havoc in the society as a whole. its increasing day by day and is one of the major challenges apart from the devastating consequences. Kashmir has been through three decades of violence, resulting in an epidemic of psychosocial disturbances among its population. A number of psychiatric problems have emerged like Depression, Obsessive-Compulsive Disorder (OCD) and Post-traumatic Stress Disorder (PTSD). The conflict-ridden valley has also seen a tremendous rise in substance abusers over the past many years. A systematic article which was written by Shabir ibn Yousuf on “Kashmir ink” a print newspaper in November 2018 the epidemic of drug abuse in Kashmir in denial were he wrote about the problem of drug addiction in the state of Jammu and Kashmir has revealed that 40% of the youngsters fall prey to drug abuse which includes both boys and girls at the age group between 17-36 years [2]. The charas (Cannabis) being smoked in socially accepted and approved center’s known as Taqyas. Kashmir (because of its geographical location and mass production of drugs) has become heaven for drug users where they can access and use drugs freely. United Nation Drug Control Program (UNDCP) reported that around 70,000 people are drug addicts in Kashmir valley alone among which 4000 are females. Many other systematic studies have revealed that youth particularly between age group 17-30 years involved in the menace of drug addiction. As per the data available at Police Drug De addiction and Rehabilitation Centre Srinagar, it has been found that the ratio of addicted patients is increasing in an alarming way with the method of hard-core drugs like heroin. Brown sugar, cocaine, fukki etc. As per the statement of Director DDRC Dr. Muzaffar he said that 90% patients are opioid abusers who approached to the center for availing treatment facility [3].

Another study which was conducted by Dr Pirzada M. Amin revealed that most common drugs were medicinal opioids (63%) followed by cannabis (53%), and people started consuming drugs at the age between 15-25 years. As for as occupational status was concerned 29% were students, 28% businessman. 21% drivers, 15% employs, 7% were laborers [4].

Other studies related to substance abuse was conducted by Mushtaq Margoob in 1993 and his studies revealed that pre dominant sex was of males age between 26-35 years and the common drug which was abused was cannabis after than medicinal opioids, especially pain reveling medicine and the least abused substance was of Alcohol [5].

Sajad Ah Bhat and Nasheed Imtiyaz, in 2017 conducted a study and found the most drug addicts were males and mainly their substance addiction was of opioids like medicinal opioids, spasmodroxylon tablets, tramadol tablets, fukki, brown sugar and herion [6].

Another study which was conducted by Dr Humaira Azim, a case study of drug abused youth of Kashmir valley, concluded that all the drug abusers were males, and majority of them were unmarried. Parental separation, divorce and disturbed family relationships, peer pressure and broken relationship increased the likelihood of adolescent’s drug problem [7].

Naqshbandi et al. interviewed 270 youth of Kashmir between the age group of 16-30 in different districts of Kashmir. His findings raveled that the conflict and unemployment are the main reasons of drug abuse among Kashmiri youth [8].

Bhat et al. conducted study which revealed that above 90% don’t have any awareness regarding the drug de addiction process in Kashmir and only 8% know about it the drug de addiction centers in the valley of Kashmir [6].

Another fruitful study which was conducted by Mushtaq et al reported that around 90% drug abusers are multiple substance abusers or poly abusers. The poly abusers are those who took more than two drugs at least for a period of one year and has also developed dependence into it e.g. a
person is consuming heroin meanwhile also taking cannabis or alcohol [9].

A study was conducted among students (13-19 years) studying in classes 7th-12th in rural and urban areas of district Ambala, which revealed that Overall prevalence of substance abuse was 60.0% for ever users and 34.93% for regular users. Substance abuse was more among male urban students belonging to nuclear families (p<0.001). Among ever users, alcohol (44.49%) was the most common substance abused while tobacco (14.42%) was mostly consumed by regular users. Substance abuse was more in age group of 17-19 years. Overall, 42% were using more than one drug combination [10].

Most of the drug users use the substances out of curiosity and in the belief that it will reduce their problems like stress, trauma, anxiety or depression. Some people become addicted to these harmful drugs because of the bad company they keep, too much pocket money they possess, lack of parental direction or guidance, easy availability of drugs and relationship issues so on [11].

The government has made the draft drug de-addiction policy public, the document has revealed that drug addiction is widespread, fast-rising and is quickly taking the form of an epidemic in the State. Several studies conducted in the valley revealed that youth particularly between the age group of 17-30 are involved in this menace of drug addiction. Government Psychiatric Hospital Srinagar, the only mental health hospital in the valley, in one of its reports had stated that most numbers of drug addiction cases belong to a very young generation. A recent study conducted by Srinagar based Institute of Mental Health and Neuroscience (IMHANS) in a Drug De-addiction center in Srinagar found that over two-third of patients in the study had started substance abuse in the age group of 11-20 years. Besides that, another important study which was conducted by Police Drug De Addiction and Rehabilitation Centre, Srinagar they found that 90% patients who approached to the center for treatment are opioid abusers (heroin, brown sugar, fukki, medicinal opioids like spasmoproxyvon, tramadol, codeine phosphate etc) in the age group between 16-30 years. The most common substances of abuse identified included nicotine (94.4%), medicinal opioids (65.7%), cannabis (63.6%), benzodiazepines (45.5%), other prescription medications (43.4%), alcohol (32.5%), inhalants (11.1%), and cocaine (7.5%). The study revealed that poly-substance abuse was found in 91.9% of the studied patients. Inhalant use was seen predominantly among adolescents (54.5%) whereas nicotine (50.2%), cannabis (49.2%), alcohol (51.1%), opioids (58.4%), and benzodiazepines (53.48%) were more predominant in the age group of 21 to 30 years [12].

To curb the menace of drug abuse in Kashmir state health department and Jammu and Kashmir police has taken various initiative to eradicate this problem in both ways like by treating drug abuse patients and also by preventing drug trafficking in the valley. As per recent survey, 65 to 70% students in Kashmir are addicts who include gateway drugs too and around 26% female students. As per Government Psychiatric Disease Hospital (GPDH) statistics, 90% abusers belong to the age group of 17-35 years with a life prevalence of drug addiction. The J&K police have taken an initiative to curb the menace by establishing three de addiction centers at Srinagar, Baramulla and Anantnag which provides both treatment and awareness programs at school and community level. These drugs de addiction centers are managed by clinical psychologists, psychiatrists, medical officers, mental health counselors, social workers, pharmacists and yoga therapists. The treatment protocol follows of different phases like registration, assessment of personality, motivation assessment, motivation enhancement, detoxification, individual counseling, family and group therapy, rehabilitation and later follow up strategy. Usually the patient is admitted for 3 to 4 weeks but it varies from individual to individual and also the substance being abused. According to center IPD report a total number of 1421 of patients has been rehabilitated among which 340 are poly substance abuser, 175 are inhalant abusers, 232 benzodiazepine abusers, 101 are alcoholic abusers 255 are opioid abusers, 285 cannabis abusers. In this rehabilitation center the day begins with the breakfast, followed by morning sessions than medical checkups by medical officer, lunch, recreational activities like dancing, singing, playing, etc. evening sessions detailed review of medical, social and psychological intervention and finally the day ends with dinner and evening group session [13].

Besides that, Jk police has also made a huge effort to eradicate its trafficking of drugs within the valley. In 2018 DGP SP VAID said that police have arrested 667 people in 542 cases under NDPS act for drug peddling and smuggling and in 2013-14 police have seized 2574 kg of cannabis and its derivatives, 11000 bottles and 17000 tablets of spasmoproxyvon.

The SMHS De Addiction Center in Kashmir valley has registered a 94.5% rise in patients since 2016 to 2017.A 489 patients visit its OPD treatment between April 2016 and March 2017, 3622 in the next twelve months, and 5113 in the twelve months after that. Between April and June 2019, as
many as 1095 more patients have visited the facility [14].

**RECOMMENDATIONS**

- Most important step is to check the flow of drugs in the valley. And very strict steps should be taken by state government to eradicate drug trafficking, for this the check posts at the Kashmir should strengthened from the security point of view.
- Liquor shops should be changed into libraries and entertainment clubs.
- Narcotic Drugs Psychotropic Substance Acts (NDPS) should be reframed with strict laws and needs to execute strictly.
- More De Addiction centers should be established followed by good infrastructure with enough strengthens of trained staff.
- More awareness about the drugs should be given to the people by using different media channels like TV, newspaper, leaflets, magazines, journals, street plays, drama, textbooks, or even by using social media like Facebook, WhatsApp, twitter etc.
- Government agencies, Educational Institutions, NGO’s and other Social institutions need to educate people especially young generation about this problem.
- Parents and caretakers should be given enough awareness about this problem so that they can detect this problem as early as possible and also provide good help of the person.
- The government should provide working avenues for the educated youth of Kashmir.
- Well organized playgrounds, sports clubs, for boys and girls must be developed in different localities.
- Social support should also strengthen so that they can provide time needed assistance like by developing a sense of responsibilities and meaning in life and also when they feel alienated and isolated from the world or community or family.
- To overcome psychological trauma and depression of drug addict enough facilities of Clinical Psychologists, Counselors and Psychiatrist should be provided with in the reachable provinces.

**Disclaimer**

The article has not been previously presented or published, and is not part of a thesis project.

**Conflict of Interest**

There are no financial, personal, or professional conflicts of interest to declare.

**REFERENCES**


