



International Journal of Research Publication and Reviews

Journal homepage: www.ijrpr.com ISSN 2582-7421

Drug Abuse among Youth in Jammu: A Case Study on Causes, Consequences, and Coping Mechanisms

Dr. Shakeeb Manhas Manzer¹, Dr. Raj Kumar², Dr. Renu Balla³

¹Assistant Professor, GDC Ramkote affiliated to University of Jammu, Email: shakeeb.manhas@gmail.com,

² Assistant Professor, Chandigarh University, Chandigarh, Email: rajkumarcuh92@gmail.com

³Assistant Professor, GDC Billawar affiliated to University of Jammu, Email: renubala824@gmail.com

ABSTRACT

Using a targeted case study methodology, this research paper investigates the concerning increase in drug abuse among young people in the Jammu district. The study explores the various factors that contribute to substance abuse, such as family dynamics, peer pressure, psychological stress, socioeconomic circumstances, and a lack of knowledge or recreational options. The study emphasizes the short- and long-term effects of drug addiction on people's physical and mental health, academic performance, family relationships, and social integration through qualitative interviews and field observations. The study also looks at the coping strategies used by the impacted youth and how the crisis is being handled by the community, educational institutions, and rehabilitation facilities. There is an urgent need for a more integrated and youth-centric approach, as the findings shows gaps in rehabilitation support and preventive strategies. In order to stop the threat and aid in recovery, the paper ends with practical suggestions for legislators, educators, and medical professionals.

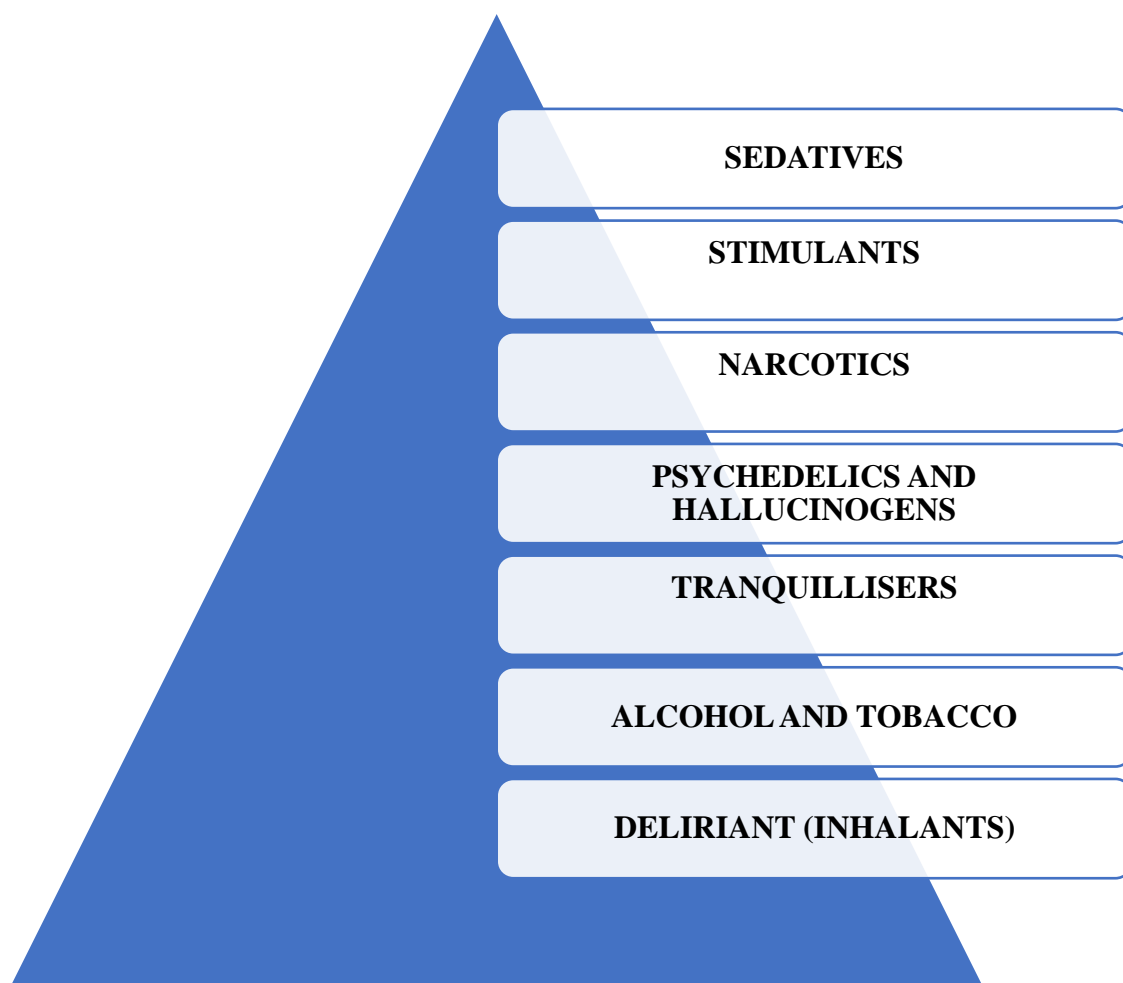
Keywords: Drug Abuse, Case Study, Consequences, Jammu District, and Coping Mechanisms

Introduction

All of the multifaceted problems in India, intoxication is the oldest and is indeed steeped in antiquity. The discovery of the creation of some kind of intoxicating substance and art is a group of settler habits and has been found to be generally ignorant of wandering. This proves the fact that we had an orderly and advanced civilization. Such habits were previously practiced in Egyptian, Babylonian, and Greco-Roman civilizations. It can be said that, barring gambling, the biggest vice of the Aryan caste in India was just drinking.

Classification of Drugs

Drugs are also classified on the idea of the consequences they need on the user. These are also as follows:-



Causes of Drug in Jammu

In present research, researcher identifies that the young person's throughout Jammu district became the foremost vulnerable cluster and simple victims of drug and habit. They're out and away the biggest drug abusing section of the population of the state. It's additionally the youth United Nations agency form and influence the living atmosphere of their fellow youth. Habituation additionally known as substance use disorder could be a major preventable reason behind morbidity and mortality worldwide. In Jammu State isn't associate degree exception. The aim of the current study is to understand the attention of habituation among folks of Jammu.

The matter of habituation among youth within the Jammu is one in every of the largest considerations these days. The matter isn't confined to the males alone however has began to grapple the feminine youth additionally. No one will deny the actual fact that the impact of habituation isn't confined to the addict alone, however additionally affects the standard of lifetime of whole family. In addition, a large vary of dysfunctional behaviours may end up from abuse and interfere with traditional functioning within the family, the geographic point, and broader community.

Untreated habit adds vital prices to families within the variety of violence, property crimes, maltreatment and neglect, reduced productivity and even state. Treatment of any sickness is feasible provided there's awareness concerning it being treatable and additionally of the agencies related to the treatment method. Same is true concerning the treatment of habituation. Through this paper a trial has been created to understand concerning the amount of awareness concerning the menace of addiction, its treatment and also the availableness of the organization and agencies related to the treatment/rehabilitation of the drug addicts within the of Jammu. Habituation is quickest growing downside among youth in developing countries and additionally in developed countries. This study appearance at the impact of conflict and state in increase of habituation among youth in Jammu.

Educational Impacts

The educational achievements of young people in the Jammu district have been severely harmed by drug addiction. Since long-term substance abuse lowers academic interest, concentration, and attendance, one of the most obvious consequences is the higher dropout rate among secondary and college students (Singh & Raina, 2021). Many students who battle addiction start to disregard their studies, don't finish their assignments, and eventually lose interest in learning more. This leads to long-term disruption of their career prospects and personal growth in addition to academic failure (Gupta & Sharma, 2022).

Academic performance is further hampered by cognitive impairments brought on by long-term drug use, such as memory loss, a decreased attention span, and poor decision-making abilities (World Health Organization [WHO], 2021). An increasing number of behavioral problems, including aggression, withdrawal, and absenteeism, are reported by educators and school administrators in the area as being either directly or indirectly related to substance abuse (Jammu Education Department Report, 2022).

The presence of drugs on or close to campus in certain public and private schools creates a dangerous atmosphere that deters other students and lowers school morale and discipline in general (Bhat & Verma, 2020). This disturbs the learning environment for others in addition to isolating the addicted youth. Additionally, many families decide not to seek professional help for their children because of social stigma or fear of legal repercussions, which delays intervention and worsens psychological and educational outcomes (Koul & Devi, 2023).

Although some non-governmental organizations and educational institutions have attempted to increase awareness through counseling services and anti-drug campaigns, the effectiveness of these efforts is limited by the lack of qualified counselors, sufficient mental health support, and school-based rehabilitation programs (UNODC, 2021). In order to guarantee early detection, preventive education, and integrated support for impacted students, addressing the educational impact of drug addiction in Jammu necessitates a thorough, multi-stakeholder approach involving schools, parents, local government, and civil society (the NIDA, 2022).

Five case studies of Drug addicted youth

In my research work i had studied five different cases discussed as below:-

Case no. 1:-Sonu (Gender- male, Age-20 years (addicted at the age of 18 years), Residence-Jammu District).

- Introduction of Sonu- He was the 10th class dropout student.
- Family background- He had four siblings (two brothers and two sisters), mother and expired father.
- Business- Being not so well educated, he run a small shop of music players for his earning. He earned 20,000 per month.

Process of addiction

Early stage:- Sonu regularly interacted with a wide range of people in her role as a shopkeeper, particularly young boys in their twenties. Before he became close to a boy who was already addicted to heroin, he had a happy life. This boy used to come to Sonu's shop a lot and even took drugs in front of him. He convinced Sonu to try heroin one day, saying it made him feel very happy. Sonu consented and took heroin for the first time at the age of 18 due to curiosity and peer pressure.

Mid Stage- Sonu began taking three doses of heroin per week. He felt he couldn't function without the drug after becoming dependent on it within a month. It quickly became essential to his survival. He became addicted to using "Chitta" (heroin), which ultimately caused him to lose all of his money. He lost his shop as a result of spending all of his savings on drugs, which negatively impacted his business.

Sonu began taking three doses of heroin per week. He felt he couldn't function without the drug after becoming dependent on it within a month. It quickly became essential to his survival. He became addicted to using "Chitta" (heroin), which ultimately caused him to lose all of his money. He lost his shop as a result of spending all of his savings on drugs, which negatively impacted his business.

He borrowed ₹3 lakhs from friends to support his addiction, which he used entirely for drugs. Creditors started contacting him and then his family to demand repayment after he was unable to make the loan payments. Sonu had not paid rent for more than six months, the shop owner also told his mother.

Final Stage: - Sonu was able to overcome his drug addiction following a year of therapy and recuperation at the rehabilitation facility. He has resumed operating his shop and is currently leading a happy and healthy married life.

Case no. 2:- Pankaj (Gender- male, Age-22 years (addicted at the age of 21 years), Residence-Jammu District).

- Introduction of Pankaj- He was a B.Tech student, unmarried.
- Family background- He had two sisters, mother and father (retired BSF Senior officer).

A friend introduced him to drugs while he was residing in the hostel. Initially, he used drugs to feel happy and relaxed. He took them once a week at first, but after six months he started taking "Chitta" (heroin) every day. He developed a serious heroin addiction. He began requesting money from his family because he found it difficult to manage his finances on a regular basis as a student. He started lying to them in order to obtain money, claiming that he needed the money for things like clothes, laptop repairs, or tuition. He even occasionally asserted that his possessions had been taken. His addiction got so bad that he began requesting money from each member of his family separately. He first asked his married sister, then his mother, and finally his father. His academic performance eventually declined, and he failed his B.Tech course in the first year. He went home after realizing his predicament. His mother confronted him after noticing a significant shift in his behavior. He acknowledged his drug addiction during the discussion. His family made the decision to assist him in kicking the habit because they were sympathetic and understanding. He was admitted to a rehabilitation facility. He improved after three months of treatment and went back to his house. But he relapsed and resumed using heroin after getting back in touch with the friend who first introduced him to drugs. For additional care, he was readmitted to the rehabilitation facility. He has now made the firm decision to stop using drugs and concentrate on starting over after realizing the detrimental effects they have had on his family life and education.

Case no. 3:- Davinder (Gender- male, Age-26 years (addicted at the age of 26 years), Residence-Akhnoor area, Jammu District).

- Introduction of Pankaj- He was a shopkeeper, married.
- Family background- He had one daughter, wife.
- Business- He runs a bakery shop.

When he made friends with a drug addict who urged him to try drugs for fun, Davinder found himself in bad company. At first, he used the drug—heroin, also referred to as Chitta—out of curiosity and pleasure. Davinder claims that because the drug made him feel relaxed, he began using it frequently, even at his shop. He developed a complete heroin addiction in four months. He admitted that he could live without food but not without drugs after a year of continuous drug use.

Addiction's Aftereffects:

1. Professional Impact: His business started to fail as a result of his carelessness and bad choices brought on by his addiction.
2. Impact on the Family: His addiction had a significant impact on his marriage. He turned aggressive and began assaulting his wife. He completely stopped taking care of his wife and daughter.
3. Financial Repercussions: Davinder went bankrupt. He sold his bike to pay for his addiction out of desperation. His wife eventually left him because she couldn't handle the situation.

Davinder was taken to a doctor for a check-up by a friend who was worried about his health. Davinder's body was so reliant on drugs, the doctor told the friend, that a sudden withdrawal could have serious psychological effects, including the possibility of suicide. The doctor said that admitting him to a rehabilitation facility was the only safe way to assist him. Davinder was admitted for treatment after heeding this advice.

Case no.4:- Raju (Gender- male, Age-20 years (addicted at the age of 18 years), Residence- Jammu District).

- Introduction of Raju- He was a student, unmarried.
- Family background- He had five siblings (two brothers and three sisters), mother (hose wife) and father (transport businessman).

Cause of addiction: The boy was introduced to drugs by his father's truck driver, who was himself a drug addict. About three times a month, the driver would offer the boy drugs to taste whenever he got home from his travels. The medications were initially provided without charge. The boy used drugs occasionally for a year before developing an addiction and daily cravings. The driver continued to supply drugs for approximately fifteen days after he began giving him money. The boy's social life and schooling were gradually impacted by the addiction. He began taking out loans from friends to support his addiction as money management became more challenging.

Consequences: Social and Educational Impact: He failed his board exams for the 12th grade and his relationships with other people soured. Financial Impact: He started stealing from his own home when he was unable to manage his finances any longer. Impact on Health: His mental and physical well-being began to deteriorate. Turning Point: The boy lost his source of drugs when the truck driver eventually quit his job. His father caught him stealing money during one of his attempts. After being beaten and confronted, he acknowledged the cause of his actions.

Case no.5:-Manzor Ahmed (Gender- male, Age-25 years (addicted at the age of 18 years), Residence- Jammu District).

- Introduction of Manzor Ahmed- He was a graduate student from Jammu University, unmarried.
- Family background- He had four siblings (three brothers and one sister), mother (hose wife) and father (Contractor).

Cause of addiction: Because of the unfavorable atmosphere in his twelfth grade, he developed a drug addiction. He began using heroine when he started college. He went on to say that when he takes drugs, he feels happy and content. He went on to say that no one ever acknowledged his addiction. He received the injections on his own. He first developed an addiction to Charas before switching to heroin.

Consequences: He was wandering here and there with friends, as he had no sense of responsibility. Later, he collapsed on the road. When the family members became aware of his condition, they admitted him to a rehabilitation centre.

Coping Mechanisms: Drug-addicted youth in Jammu district use a wide range of coping strategies, which are impacted by social, cultural, and personal factors. Seeking peer support is one of the most popular tactics, in which people turn to friends who are either in recovery from addiction or have abstained from drug use to provide emotional support and a feeling of community. For psychological solace and a moral compass, some young people resort to religious or spiritual activities like prayer, meditation, or going to religious events. Participating in physical activities and sports has also become a positive outlet, promoting discipline, lowering stress, and boosting self-esteem. (Kaur, 2020).

Others turn to official rehabilitation facilities, where therapy sessions, counseling, and medical care help address underlying psychological problems as well as physiological dependence. Family support is essential to recovery because constructive parental and sibling involvement can inspire hope and drive. Self-directed learning and artistic expression—such as writing, painting, or music—can occasionally be therapeutic endeavors that assist people in processing their feelings and experiences. Many young people still struggle with issues like relapse, stigma, and lack of access to long-term care despite these coping mechanisms, which highlights the need for more organized, community-based intervention programs and ongoing psychological support.

For young people in areas like Jammu district, where social, economic, and cultural pressures converge, overcoming drug addiction is a difficult process. Adolescents with drug addiction frequently use coping strategies that are a reflection of their immediate surroundings, the availability of support networks, and their own resilience. Peer support and group rehabilitation are two of the main coping strategies that are seen. Many young people who want to kick addiction join peer-led community initiatives or support groups like Narcotics Anonymous. These groups offer a secure setting for exchanging stories and picking up tips from people who have gone through comparable struggles. In these settings, the feeling of acceptance and camaraderie frequently serves as a catalyst for healing.

Simultaneously, family participation becomes an essential coping mechanism. Families that communicate openly, provide emotional support, and refrain from using punishment establish a supportive atmosphere that promotes healing. On the other hand, relapse is frequently caused by toxic home environments or a lack of family support. Better coping outcomes are reported by young people who receive psychological therapy and counseling, whether from government rehabilitation programs, school counseling services, or non-governmental organizations. Treatments like Motivational Enhancement Therapy (MET) and Cognitive Behavioral Therapy (CBT) assist people in changing their thought patterns, developing healthier behavioral responses, and comprehending the underlying causes of their addiction. (Gupta & Sharma, 2022).

Participating in productive activities and established routines is another important coping mechanism. A sense of purpose and a decrease in cravings are frequently reported by young people who focus their energies on academics, vocational training, sports, or the creative arts (such as writing, painting, or music) (World Health Organization [WHO], 2021). Some people find that volunteering or performing community service helps them reestablish their social networks and sense of value. Religious and spiritual frameworks are also very important in Jammu. Spiritual activities like prayer, meditation, or going to religious lectures provide many young people with comfort and strength. When backed by faith-based organizations that assist with addiction recovery, these practices provide hope and discipline (Raina & Ahmed, 2023).

Furthermore, it is impossible to ignore the importance of educational institutions. Prevention and early intervention are greatly aided by schools and colleges that use peer mentorship models, life skills training, and awareness campaigns (UNODC, 2021). But not every coping mechanism is beneficial. Without the right support, some young people turn to unhealthy coping strategies like aggression, self-isolation, or substance abuse (Sharma, 2019). This emphasizes how urgently systemic interventions are needed.

All things considered, a multifaceted support system—including family counseling, mental health services, community awareness, and inclusive rehabilitation policies—is necessary for young people in Jammu to effectively cope with drug addiction. The availability of social reintegration opportunities for individuals in recovery and the consistency of support are critical factors in the effectiveness of coping mechanisms (Koul & Devi, 2022). Thus, destigmatizing addiction and bolstering institutional networks are critical to long-term recovery.

Discussion and Conclusion

The results of this case study provide insight into the rising issue of drug addiction among young people in the Jammu district, mirroring more general trends seen throughout India. Peer pressure, unemployment, a lack of parental supervision, easy access to drugs, and psychological stress are some of the root causes that have been identified, and they highlight the problem's complex nature. The vulnerability of young people in the area is further exacerbated by social and cultural factors, inadequate mental health care, and low educational engagement.

As mentioned, the effects on education are especially concerning. Substance abuse affects peers' learning potential and the school environment in addition to impairing academic performance and increasing dropout rates. School administrators, teachers, and counselors have noted behavioral problems, low attendance, and disinterest in learning, all of which lead to long-term socioeconomic disadvantages.

Affected youth use a wide range of coping strategies, from healthy ones like therapy, family counseling, peer support groups, and employment to unhealthy ones like substance abuse, withdrawal, or violence. Strong support networks in the community and at home were found to increase the likelihood that young people would seek rehabilitation and stay in recovery. The effectiveness of intervention efforts is still constrained by systemic obstacles, such as social stigma, restricted access to mental health care, and underfunded schools.

Additionally, local government, educational institutions, and civil society all play critical roles in prevention and rehabilitation. Despite the fact that some NGOs and educational institutions have started awareness campaigns, their scope and impact are still restricted because of a lack of funding, follow-up, and coordination. According to the data, comprehensive, consistent, and inclusive intervention models are still required even though awareness is rising.

In conclusion, drug addiction among youth in Jammu district represents a pressing public health and educational crisis. It is not merely a personal failing but a manifestation of deeper socio-economic and psychological issues affecting young people in the region. The case study emphasizes the need for a holistic, multi-pronged approach that includes preventive education, community-based rehabilitation, improved access to mental health services, and stronger family and school engagement.

It is imperative that policymakers give priority to youth-focused intervention strategies, enforce more stringent regulation of the drug supply chain, and fund accessible and youth-friendly rehabilitation facilities. In order to detect at-risk pupils early on, schools should be equipped with life skills education programs and qualified counselors. Addiction must be de-stigmatized at the same time so that families and individuals can get treatment without worrying about being shunned by society.

In the end, combating youth drug addiction in Jammu necessitates cooperation between the fields of education, health, law enforcement, and civil society in order to create a strong and encouraging environment where young people can flourish without being ensnared by substance abuse.

References

- Arora N. (1992). Stressful life events and personality make up in drug dependence. Fifth Survey of Educational Research, 2, NCERT, (1988-92), 963-964.
- Basu D, Malhotra AK, Varma VK. Buprenorphine dependence: A new addiction in India. *Disabilities and Impairments* 1990; 3:142-6.
- Baba, T. A., Ganai, A. M., Qadri, S. S., Margoob, M. A., Iqbal, Q. M., & Khan, Z. A. (2013). An epidemiological study on substance abuse among college students of north India (Kashmir valley). *International Journal of Medical Science and Public Health*, 2(3), 540-545.
- Bhat BA, Bhat AR, Wani MA, Nusrat A (2016) Drug addiction awareness among university students of Kashmir valley, communicated.
- Bhat, M. A., & Verma, R. (2020). *Substance abuse and its effects on school environments in Jammu region*. *Journal of Youth and Society*, 18(3), 45–56.
- Garg PK and Parikh IJ. Profiles is Identity. A Study of Indian Youth at Crossroads of Culture. New Delhi: Vision Books, 1976
- Gupta, A., & Sharma, P. (2022). *Psychological interventions in youth addiction recovery*. *Indian Journal of Psychiatry*, 64(3), 215–223.
- Kaur, M. (2020). *Peer support in drug rehabilitation: A study of youth in North India*. *Journal of Social Work and Substance Abuse*, 18(1), 30–44.
- Jammu Education Department Report. (2022). *Annual School Report on Student Behavior and Performance*. Government of Jammu and Kashmir.
- Koul, R., & Devi, S. (2023). *Barriers to seeking help for drug abuse in Jammu: A socio-cultural perspective*. *Social Work and Mental Health*, 21(2), 110–119.
- Koul, R., & Devi, S. (2022). *Challenges of drug rehabilitation in Jammu and Kashmir*. *Journal of Community Health*, 47(2), 120–128.
- Kaira R.M. (1997). *Drug Addiction in Schools*, New Delhi: Vikas Publishing House.
- Khan, M. Z., & Singh, D. R. (1979). Drug dependence among college youth in India. *Indian Journal of Youth Affairs*, 7(4), 1-9.
- Kumar, R. B. P. (2013). Kuppaswamy's socio-economic status scale-a revision of economic parameter for 2012. *International Journal of Research & Development of Health*, 1(I), 2-4.
- Kumar, S., Grover, S., Kulhara, P., Kumar, S. M., Basu, D., Biswas, P., & Shah, R. (2008) Inhalant abuse: A clinic-based study. *Indian journal of psychiatry*
- Khan M (2011) Drug addiction in Kashmir. *Physicians Academy*.
- Malhotra, A. K., Kapur, R. L., & Murthy, V. N. (1978). Drug dependence: A preliminary survey of hospital registrations. *Indian Journal of Clinical Psychology*, 5, 131-137.
- Maqgoob MA, Dutta K (1993) Drug abuse in Kashmir - experience from a psychiatric diseases hospital. *Indian J Psychiatry* 35: 163.
- Mushtaq AM, Majid AB, Dhuha M, Murtaza I, Abbas Z, et al. (2004) Thin layer chromatography (TLC) in the detection of current nature of drug abuse in Kashmir. *JK Pract* 11: 257-260.
- National Institute on Drug Abuse (NIDA). (2022). *Drugs, brains, and behavior: The science of addiction*.
- National Institute on Drug Abuse (NIDA). (2022). *Family and addiction: The role of parental support in recovery*.
- Raina, A., & Ahmed, M. (2023). *Faith-based recovery models in South Asia: A cultural perspective*. *International Journal of Addiction Research*, 29(4), 301–312.
- Sharma, R. (2019). *Maladaptive behaviors in youth addiction: A sociological review*. *Indian Journal of Youth Studies*, 12(2), 99–113.
- Singh, N., & Verma, D. (2021). *The impact of peer mentoring in substance abuse treatment*. *Social Science Review*, 33(1), 48–60.
- Singh, A., & Raina, M. (2021). *Substance use and academic disengagement among students in North India*. *Journal of Educational Psychology*, 34(2), 92–101.
- United Nations Office on Drugs and Crime (UNODC). (2021). *Drug prevention programs in South Asia: School and community strategies*.
- United Nations Office on Drugs and Crime (UNODC). (2021). *School-based prevention of drug abuse: Global best practices*.
- World Health Organization (WHO). (2021). *Youth and substance use: Strategies for prevention and recovery*.