RESEARCH ARTICLE

PSYCHOSOCIAL FACTORS ASSOCIATED WITH ALCOHOL AND DRUG ABUSE AMONG COLLEGE STUDENTS RESIDING IN HOSTELS IN PUNJAB: AN EMPIRICAL STUDY

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Abstract

The youth of Punjab in present times is showing a greater inclination toward alcohol and drug abuse. It is of growing concern as more and more youth are falling prey to this devastating problem. This article describes psychosocial factors in the college youth residing in hostels, which seem to lead them to indulge in alcohol and drug abuse to cope with their psychological turmoils. The study sample includes academically diverse youth, aged between 18 and 25 years, both males and females (100 students residing in hostels) in 7 urban colleges in Hoshiarpur and Jalandhar districts of Punjab. Data were collected between April 2015 and October 2015 via a nonexperimental descriptive self-developed questionnaire. The primary data was obtained through in-depth interviews with each student. Purposive cluster sampling was done to select a sample frame of 100 students out of a total of 357 students that were interviewed. Descriptive and inferential statistics were used to analyze the data, with a 5% level of significance. The result of the study revealed that significant association (P<0.05) exists between emotional and social instability, parental consumption of alcohol/drugs, educational stress, and the students' alcohol and drug abuse problem. The statistics generated could provide an understanding of the factors that can be addressed to help reduce the incidence of alcohol and drug abuse in these youth.

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Introduction:

A strong association between drug abuse, human behavior, and social functioning exists not only in India but also globally. Alcohol and drug use by any family member affects not only the family but also becomes a social burden because society gets adversely affected. Many unpleasant outcomes, like reduced educational attainment, negligence, law-breaking, criminal behavior, mental health problems, and delinquency, etc. are associated with drug abuse. (Fergusson et al., 2002; Kandel et al., 1986; Newcomb et al., 1999).

Prolonged drug abuse not only affects an individual's personality and behavioral attributes but is also related to alteration/deterioration in genes and neural circuitry. The brain damage from drug use hampers an individual's ability so much that they lose their judgmental and authoritative capacities. The addicted person grows into a baffling personality who is unable to take decisive measures in their life. A whirlwind of mental instability and unhealthiness leads to compulsive drug cravings, seeking, and continued use despite adverse consequences. Drug
abuse can lead to serious medical problems, including HIV/AIDS, hepatitis, cardiac diseases, strokes, and cancer (NIDA, 2012).

Consumption of illicit drugs has significantly increased in Punjab over the past couple of years. Ranked as the "second richest" State in terms of G.D.P., Punjab was once called the 'breadbasket of India' and a "crown jewel," because of high levels of growth and productivity in the agricultural sector. India felt agog over its "immense perspective in the manufacturing and service sector" was an aggrandizing character and exciting feature for India. But today it is facing unsustainable farming culture accompanied by a decline in economic growth. Income growth has slowed down, the failure of technology in bringing desired development and shrunken employment has negatively affected the youth of Punjab, and they are starting to show signs of fatigue.

The drug epidemic that has swept across Punjab is frequently broadcast in the national media. Alarmingly nearly 60 percent of all illicit drugs seized in India are confiscated in Punjab. According to the 2011 report on drug abuse & alcoholism by the Ministry of Youth Affairs and Sports says that roughly 40% of youngsters in Punjab in the age group of 15 to 25 years are troubled in life because they are getting crushed under the effects of drugs and alcohol. According to a U.N. document, Punjab is the only state in India which is under the maximum grip of Injecting Drug Use (I.D.U), specifically Propoxyphene and Coaxil and the State has the highest number of opium users nearly 56%. This report is based on the data collected during 2000-2001 from 203 de-addiction centers in various states of India. Punjab was followed by Rajasthan and Haryana, having around 11% and 6%, respectively. UN AIDS / SPY M report of 2008 estimates that Injecting Drug Use (I.D.U.) is the latest trend among the youth of Punjab who takes hefty doses of I.D.U.s. More than half of the drug addicts are taking 2-6 injections per week while a fraction of the rest of the third reported taking injection daily, "once per day." Tehelka - an Indian news magazine projected a very pessimistic report about the drug menace of the state when it concluded that no parallel is available in India the way the youngsters of State Punjab are taking I.D.U.s like Coaxil directly into their bodies.

This drug abuse infliction can have long term adverse effects on the demography of the state, mainly because the age group of 15 to 25 is considered as the most productive generation. Unfortunately, with 56% of this young generation being addicted, one can project this will undoubtedly have an adverse outcome on their reproductivity.

The study of the problem of alcoholism and drug addiction in Punjab requires a different perspective for research because the problem is unique due to numerous reasons. Punjab, an Agrarian State, is known for its valor, gallantry, and hard-working people. Not much is known about the psychosocial factors which might be contributing to this grave problem of drug abuse in the youth of Punjab. Childhood maltreatment, drug abuse in the family, parent-child conflict, marital conflict, deviant peer relationships, and physical, sexual, and emotional abuse might be the reasons pushing the youth towards the deviated path of drug abuse. Parental educational qualifications and socioeconomic status of the family, along with other contributing factors like domestic violence, favoritism/discrimination, bullying, relationships with wrong-doers are the various factors that could be associated with drug abuse in youth. Still, these have not been surveyed in the case of Punjab. Many of these factors may have an impact on the lives of youth residing in hostels for pursuing higher education and could be contributing towards them falling prey to drug abuse.

Our study was conducted to identify psychosocial factors in the youths, their families, peers, and the college environment, which could be contributing to their drug abuse problems, while they are studying and residing in Hostels, trying to cope with the psychological aspects of their lives. The study covers various psychoactive substances, including alcohol and illicit drugs, which are said to be widely available in the districts.

Objectives:

And Aims of the Study:
The primary aims of our conducted study were:
1. To identify psychosocial factors associated with drug abuse and to compare the data to assess the magnitude and patterns of drug abuse across the state
2. To evaluate behavioral features associated with drug abuse
3. To scrutinize the community cognition and its attitude toward drug abusers and perceptions regarding drug abuse.

Two separate research methods were adopted to accomplish the goals of the survey;
Interviews were held in the seven colleges of the two districts of Punjab, to identify the specific population which could be used to answer the questionnaire for the survey.

Respondent-driven sampling was made in these districts, and the questionnaire was given to reliable respondents.

The main objective of this study was to assess the situations that could be contributing to drug abuse among these students who are living away from their parents’ homes. The data obtained can guide and improve local, cross-national, and global reporting on drug trends. Moreover, an evaluation of the possible reasons behind drug abuse can help in planning prevention strategies and campaigns.

**Methodology:**

The study sample included academically diverse youth aged between 18 and 25 years, both males and females (100 hostel residents) in seven urban colleges of Punjab. Data were collected between April 2015 and October 2015 via a nonexperimental descriptive self-developed questionnaire.

The primary data was obtained through in-depth interviews of 357 students from seven colleges of Hoshiarpur and Jalandhar districts of Punjab. Purposive cluster sampling was done to select a sample frame of 100 students in these two districts from amongst the 357 interviewed students. When questioned about their alcohol and drug use, the students who either underestimated or overestimated their alcohol/drug abuse habits or if it was identified that the risk of receiving incorrect responses was high, those students were dropped out of the next phase of the study where in-depth interviews were conducted. Only those students who were found to provide genuine responses were given the questionnaires so that data collected through the survey could have a higher level of reliability and validity. The students that were chosen had rural as well as urban backgrounds. Some had influential socioeconomic status, while some had poor economic conditions.

Descriptive and inferential statistics were used to analyze the data with a 5% level of significance to interpret the striking impacts and relationship between the variables. The result of the study revealed that significant association (P<0.05) exist between emotional and social instability, parental consumption of alcohol, educational stress, and youth alcohol and drug abuse. The statistics generated will provide an understanding of the factors that could help reduce the incidence of teenage substance abuse in Punjab.

**Tools:**

Socio-demographic record sheet: Socio-demographic sheet was developed for the study. It included name, class, age, gender, monthly income of parents and their education, number of family members, and the brief background history.

A self-directed Youth psychosocial Problems Inventory (Y.P.I) has been developed to establish psychosocial problems for the students of 18 to 25 years of age. The major issues which the students face in different fields while residing away from their parents and pursuing their education were framed based on interviews that were conducted. Twelve threshold areas related to family problems, college problems, hard work scale, academic achievements, deviant behavior, temperament, rebelliousness, attention deficit disorder, negative beliefs, depressive and anxiety disorders, over sensitivity, and individual psychometric problems were chosen. Based on these twelve domains, Y.P.I was formulated containing 50 statements belonging to the main areas, with the areas further divided into sub-areas. Each statement had to be answered from trinomial options: True, partially true, and false provided (with tick option) against each statement. The reliability coefficient of Y.P.I has been found to be 0.80.

Eysenck’s Personality Questionnaire Short form (EPQS) (Eysenck,Eysenck &Barnrett, 1985) containing 36 items was used to determine Neuroticism (N) Extraversion/Introversion (E) and Psychoticism/Socialization (P) and lie scale. The data regarding the persons’ general beliefs regarding themselves were generated through these 36 self-reporting items. Twelve questions were framed to assess the traits of Neuroticism(N) Extraversion/Introversion (E) and Psychoticism/Socialism each and 12 was framed for Lie scale.

Each question has a binary response ‘yes’ or ‘No’. Each dichotomous item has been provided with the scores’ 1’ or ‘0’. Therefore each scale has a maximum possible score of ‘12’ and minimum score ‘0’.
Alcohol use disorders in the past one year (either abuse or dependence) were encoded '1'. Cannabis or opium use more than five times in the past year was also encoded '1'. Sedatives, stimulants, and opiates were coded under 'other drug use,' and the number of drug types used from this group, five times in the past one year, was given scores ranging from '0' to '3'. Score '0' was assigned for "no use of these drug types" and score '3' for the use of all three drugs.

The procured data were analyzed first using descriptive statistics, and then inferential statistics were applied. Descriptive statistics included the mean, percentage, and standard deviation (S.D.). Then inferential statistics was undertaken, which included chi-square to understand the consequences and spectacular relationship between the variables.

Results:-
The students studying in the hostels were both from rural and urban backgrounds. More than 90% of the students consumed alcohol. 12% of students admitted to consuming cannabis. 8% of students confessed using smack, and 6% of students acknowledged injected drug use (I.D.U.) of all the students, only 2% of students admitted to childhood maltreatment.

Both the level of parental education, as well as rural background, were the most common factors that had an impact on the student's discernment regarding conformity to substance use. The findings indicate a positive correlation between low self-esteem and rural background. 20% of the students who were from rural backgrounds found it challenging to cope with the lifestyle of urbanites, lacked self-confidence, had low self-esteem, and faced emotional and adjustment problems. The fear of being scoffed at and confusion seems to lead towards their propensity towards drug abuse.

The next most potent factor associated with the students' drug abuse was peer influence and curiosity. More than 90% of the users initiated substance use out of peer pressure, pressure from the senior students, and influential friends. However, they were aware of the potential adverse effects of substance use. These students develop new close relationships in the hostel and are trying to move on from identifying with their families towards identifying with their peer group and identifying themselves as independent adults. This psychosocial change of forming anew identity and self-regulation affects their young minds and seems to increase the risk for substance use. They are motivated to use substances to amplify social position or to join an influential group resulting in an association of a deviant peer group just out of 'need for socialization' whereby the 'feel-good factor' pulls them toward drugs. Another observation is that the students who seek atypical connections in their social sphere and fall prey to aberrant peer groups are more likely to have conflicted parent-child relationships.

Here is no doubt that the ethnography of Punjab reflects its most distinct cultural pattern, masculinity. Furthermore, there is a prevalent patriarchal culture in the State, and boys perhaps are allowed to have a higher degree of freedom in comparison to girls to control their own lives. Those from rich economic strata have more chances of falling prey to drug abuse because of the tendency to show off. The Punjabi boys are more pampered and have accessible admittance to money as well as exposure to media and the internet and therefore are exposed to the various cultures. A fascination for global lifestyle, modernity, and highprofile cultural ideas have led to 'captivation of mindset up' due to which more and more youth are falling prey to drug abuse. The statistics, when applied to the youth residing in the hostels, show that the psychological, emotional, and developmental problems are occurring on a scale of exceptional proportion. The culture of masculinity, high aspiration, to gain popularity through bullying and association with gangs and modernism are significant and dynamic driving factors that are all-powerful in pulling them deep down into the drug abuse chuckhole. And it should be noted that more than five years of drug abuse leads to impairment in making smart choices. Those who use I.D.U.'s and cannabis demonstrate impaired ability to make decisions.

The fear of a non-bright future and non-fulfillment of aspirations even after studying hard is another factor. 82% of the students want to enjoy the life they have an "apprentice life." Thus, depression begins in the life of students before the onset of substance abuse. The chances of facing unemployment loom large over their upset minds. A mismatch between educational qualifications and the skills required to get white-collar jobs, stagnating incomes, and unemployment in the State is having a distressing psychic impact on the minds of students. Taking drugs leads them to 'getting high' feeling, and they find it a means to 'escape stress.' They acquire 'a sense of belonging within the peer group,' and feelings of independence, and exercising autonomy with a notion of accomplishment of adulthood. The
dwindling supportive bonds either due to busy schedules or increasing economic stress both on the parents and their children and the changing cultural values are some of the other factors which seem to be directing these youth towards drug abuse.

51% of students have alcohol/drug abuse problems in their family history, which predisposes them towards drug abuse behavior. These students stated that they felt neglected at home, and the domestic violence seen at home was also found to be a risk factor leading to their drug abuse.

30% of drug users are rural youth; most of them come from middle or upper-middle-class strata. They show that high levels of family stress, like the low income of their parents, tend to marginalize them socially, and thus these students approach the path of drug abuse to cope with these stressors.

Table I demonstrates the socio-demographic status of the respondents. Figure 1 represents the demographics of students, and figure 2 presents the family background of the students. Table II shows the factors affecting alcohol and drug abuse among students, along with the percentage of an agreement to disagreement on the factors. Table III presents the significant associations (P< 0.05) between peer group influence, emotional instability, parental alcohol/drug consumption, environmental conditions, educational stress, and students' alcohol/drug abuse using chi-square. Chi-square is used to find how the actual data is fitting closely to expected data. With the chi-square value, we can determine if the observed data is significant or not. The following formula is used to calculate significance (X), where o is the observed value, and e is the expected value.

\[ X^2 = \sum (o-e)^2 / e \]

The significance test alone is not sufficient as it does not provide the degree of effect. Therefore, the presenting effect size would demonstrate the extent of the effect. We use Phi (\(\phi\)) to present the effect size. The Phi (\(\phi\)) is given as follows:

\[ \phi = \sqrt{(X^2/n)} \]

Where \(X\) is Chi and \(n\) is the total number of observations. Figure 3 presents the association between chi-square variable and alcohol/drug abuse.

**Table I:** Socio-Demographic Status of Respondents (n = 100).

| VARIABLES                                | PERCENTAGE |
|------------------------------------------|------------|
| **Sex:**                                 |            |
| Male                                     | 96         |
| Females                                  | 04         |
| **Age (years):**                         |            |
| 18-25                                     |            |
| **Family background:**                   |            |
| Joint                                    | 20         |
| Nuclear                                  | 66         |
| Single parents                           | 14         |
| **Parental annual income:**              |            |
| Above 1million                           | 37         |
| From 0.5- 1 million                      | 42         |
| Below 0.5 million                        | 15         |
| Below 0.2 million                        | 06         |
Figure 1: Demographics of students.

Figure 2: Family Background of the students.

Table II: Factors Affecting the students' Alcohol& Drug Abuse (n =100).

| Variable                                | % age | Response                |
|-----------------------------------------|-------|-------------------------|
| 1. Socioeconomic Status of The Family /Parents |       | Strongly agree          |
|                                          | 34    | Agree                   |
|                                          | 22    | Undecided               |
|                                          | 07    | Disagree                |
|                                          | 26    | Strongly disagree       |
| 2. Influence of peer group              | 62    | Strongly agree          |
|                                          | 34    | Agree                   |
|                                          | 0     | Undecided               |
|                                          | 04    | Disagree                |
|                                          | 01    | Strongly disagree       |
| 3. Environmental position /State/Condition | 64    | Strongly agree          |
|                                          | 16    | Agree                   |
| Variable                                                                 | Chi-square | Remarks    | Phi √(x²/n) |
|------------------------------------------------------------------------|------------|------------|-------------|
| Peer group Influence                                                  | 142.9      | Significant | 1.195       |
| Environmental conditions                                              | 146.8      | Significant | 1.212       |
| Parental history of alcohol/ drug abuse                               | 49.6       | Significant | 0.704       |
| Emotional quotient                                                    | 97.3       | Significant | 0.986       |
| Stress of academic achievements                                        | 38.7       | Significant | 0.622       |

Table III: Association between chi-square variable and alcohol/drug abuse.
Figure 3: Association between chi-square variable and alcohol/drug abuse.

Table III presents the Phi value. The Phi value gives us the effect size. The data states that the effect size of peer group influence was 86% on the students, the effect size of emotional instability was 82%, the effect size of parental alcohol/drug consumption was 76% on students, the effect size of environmental conditions was 89%, and educational stress was 73%.

More than 90% of students consume alcohol. Table IV represents the percentage of students who used drugs. 12% of students admit to consuming cannabis. 8% of students confessed using smack, and 3% of students acknowledged using injected drug use. 2.5% conceded the use of opioids while tobacco use prevalence is almost negligible, only 0.5% that too by the students who do not belong to Punjab by birth.

Furthermore, on the basis of the study, it is suggested treatment of students with substance use should be given priority by the government and the health professionals because nearly 13% of the substance and alcohol use disorder were found to suffer from mental disorders. Figure 4 represents the substance usage by students.

Table IV: Percentage of students using substance other than alcohol.

| Substance Use | Percent of students |
|---------------|---------------------|
| Tobacco use   | 0.5%                |
| Cannabis      | 12%                 |
| Opium         | 2.5%                |
| Smack         | 8%                  |
| I.D.U.        | 3%                  |
Discussion and Conclusions:
After the assemblage of the study, the problem of alcohol and drug abuse appears to be widespread in college youth in Punjab. The popularity of drug abuse among over-energetic Punjab's youth speaks volumes about fear, stress, sadness, and anxiety amongst them. The negative subtenant effect on their lifestyle is hindering their ability to attain their educational goals while attending college. They are less aware of the longterm negative impacts of drug abuse like health problems like cancer, HIV/AIDS and sterility, etc.

The findings further indicate a significant negative correlation between Academic achievements and problem areas. These students have more deviant behavior, Rebellious nature, attention deficit disorder, and many other complications. They have negative beliefs regarding life, along with depressive disorders, anxiety disorders, and antisocial personality development. All these characteristics, in the long term, can affect the whole social pattern of the community. These students were found to be socially irresponsible, unsympathetic, and manipulative.

Research has revealed that there is a positive correlation between crime and substance use. The brisk, lively, and frenzied behavior of Punjabi youth inclines them towards delinquent behavior, gang formation, and other criminal activities.

Overall findings reveal that rural youth have more communication and adjustment issues, which leads to a more complicated life, and they face more problems than urban youth. This highlights the need for community-based mental health care centers.

Finally, it can be said that it is essential that parents and care providers understand the factors that seem to be leading the youth towards alcohol and drug abuse problems and accordingly plan strategies and campaigns to check this menace before it is too late; otherwise, the country may lose such a brave race of Punjabis.

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