DRUG ABUSE AMONG RICKSHAW PULLERS IN INDUSTRIAL TOWN OF LUDHIANA

RAJEEV GUPTA1
R.L. NARANG2
KESHO RAM GUPTA3
SURJIT SINGH4

SUMMARY

250 rickshaw pullers have been studied on socio-demographic factors, the extent of life use, recent use, current use, and the frequency of use of various drugs, and motivating factors for consuming these drugs. The results of present work have been discussed.

In the last one decade a number of studies have been done regarding abuse of drugs in various population groups in India. Considering the heterogeneity of population of our country it is not feasible for any worker to cover all sections of our society. The various groups covered so far are: High school children (Mohan et al 1978), College and University students (Varma et al 1977, Dube et al 1977) medical students (Sethi et al 1977) and junior doctors (Choudhary et al 1980). Some workers have also studied drug abuse in general population (Lal & Singh 1978, Deb and Jindal 1974, Sethi et al 1979). Though in these studies different population groups have been studied yet they give us a fair idea about the magnitude of the problem of drug abuse in our country.

Very little information is available so far as the problem of drug abuse in labour class of India is concerned. A large number of our labour is in unorganised sector and out of it rickshaw pullers are an occupational group that is also somewhat outside the main stream. They frequently live in sub-standard housing, have low incomes, and are subject at times to considerable economic hardship. We felt that their tendency to use drugs would be quite common given their socio-economic circumstances and relative isolation from major institutions. Their close involvement with tourists may also increase their exposure to those who also seek drugs.

Present work was undertaken to study socio-demographic factors, the extent of life use, recent use, current use, and the frequency of use of various substances among rickshaw pullers and motivating factors for consuming those substances.

Material and Methods

These subjects were randomly selected from six rickshaw stands of civil lines, Ludhiana. All those rickshaw pullers who were available on these stands during 2 weeks period were included for this work. Out of 280 rickshaw pullers contacted 250 extended their co-operation for the present study. A semistructured proforma was constructed for this study. The questionnaire included certain demographic variables, as sex, age, number of years of education completed, religion, domicile (rural/urban), whether staying alone or with family, full time/part time job; and

1. Senior Lecturer.
2. Prof. & Head.
3. Registrar.
4. Senior Nursing Attendant.

Department of Psychiatry, Dayanand Medical College & Hospital, Ludhiana-141001 (Punjab)
pattern of use of drugs. The respondents were assured of the confidentiality and anonymity of the responses. Each respondent was assigned to one of the following six groups:

a) Ever used, who used any of the drugs even once in life time.

b) Recent use, who used drug in the last 12 months.

c) Current use, who used drug in the past 30 days.

d) Light-users, who had not used drugs either daily or weekly in past month.

e) Moderate-users, who used drugs weekly but not daily in past month.

f) Heavy-users who used one or more drugs in past month on a daily basis.

Results

Table 1 shows various socio-demographic variables of rickshaw pullers. Nearly half of them (51.8%) were below the age group of 30 years and about one third were illiterate. Only one respondent worked on part time basis, the rest were full time rickshaw pullers. 170 (68%) of them worked during day and 75 (30%) worked both during day and night time. During the growing period a large number of them lived in rural area, while in the last 12 months large number of them had lived in urban area. The number of migrants was more than those who had Punjab domicile. Migration was predominantly from Uttar Pradesh, Bihar and Madhya Pradesh. A small number of migrants were from Himachal Pradesh and Haryana.

In this study the Hindus out-numbered the Sikhs and the Muslims. Migrant population was predominantly constituted of Hindus.

Details of drug use are presented in table 2.

The analysis of data shows that Tobacco (92%) and alcohol (76%) in that order, fol-
Table 2

| Drug   | Ever used | Non-users | Recent use | Current use | Light use | Moderate use | Heavy use |
|--------|-----------|-----------|------------|-------------|-----------|--------------|-----------|
|        | N         | N         | N          | N           | N         | N            | N         |
| Alcohol| 190 (76.0)| 60 (24.0) | 172 (68.8) | 136 (54.4)  | 35 (14.0) | 91 (36.4)    | 10 (4.0)  |
| Tobacco| 230 (92.0)| 20 (9.0)  | 200 (80.0) | 198 (79.2)  | 1 (0.4)   | 47 (18.8)    | 150 (60.0) |
| Cannabis| 40 (16.0) | 210 (84.0)| 20 (8.0)   | 20 (8.0)    | 0         | 10 (4.0)     | 10 (4.0)  |
| Opium  | 6 (2.4)   | 246 (97.6)| 2 (0.8)    | 2 (0.8)     | 0         | 2 (0.8)      | 0         |

The frequency of abuse of the 136 (54.4%) alcohol current users was further categorised. 35 (14.0%) were light users, 91 (36.4%) were moderate users and 10 (4.0%) were heavy users. Out of 198 rickshaw pullers who used tobacco, 150 (60.0%) were heavy users, 47 (18.8%) were moderate users and one was a light user. There were 10 (4.0%) moderate and heavy users of cannabis each. None of the rickshaw pullers was consuming opium daily and only 2 (0.8%) were moderate users.

Table 3 shows reasons for taking drugs: Majority (52 to 60%) were taking to remain awake, out of curiosity and to overcome boredom. 28.4% were using drugs to induce sleep. Few took to get pleasure or kicks, to increase physical strength and get rid from fatigue, to celebrate certain occasions and for the sake of company.

Discussion

In this study we have presented our findings with regard to the prevalence and pattern of drug abuse in rickshaw pullers of Punjab. The results showed that tobacco was clearly number one drug ever used by rickshaw pullers (92%). Tobacco users were heavy users while alcohol users were more moderate users. Many studies have not included tobacco amongst the drugs surveyed. However, Mohan and associates (1978) who surveyed tobacco use in students reported a higher percentage of regular users of tobacco as compared to alcohol or other drugs. Varma et al. (1979) reported that next to alcohol, tobacco was the drug ever experienced by the largest number of students.

After tobacco, alcohol was the next drug ever used by rickshaw pullers. It is not in accordance with the findings reported by Mohan & Thomas (1978), Sethi
and Manchanda (1978) Varma and Dang (1979) & Choudhary et al (1980) where alcohol was most commonly misused drug. But in our study ever use, recent use and current use of alcohol was quite high. Indirect excise data strongly suggest a rapid increase in alcohol consumption in our country in recent years, especially over the last three decades. Lal and Singh (1978) concluded that number of excessive alcohol users in Punjab was fairly high even by Western standards but the number of alcohol drinkers was comparatively low. But the high overall consumption figures were in fact due to heavy drinking by a very small minority of population.

After alcohol cannabis has been third most commonly misused drugs in the present study. Similar findings have been reported by Sethi and Trivedi (1979) in their drug survey in rural population. But Mohan et al (1977) and Lal and Singh (1978) found opium being abused next to alcohol. Such a difference may be due to the fact that 44.8% of population of rickshaw pullers in our study are migrant from Uttar Pradesh, Bihar and Madhya Pradesh. Greater consumption of cannabis is possibly a reflection on the social sanction that cannabis use enjoys among this migrant population in Punjab. It may also reflect on free availability of this drug in Punjab, since the plants of Cannabis Indica grow quite widely here.

In a study from rural population, Sethi et al (1979) reported that opium was used by 0.7% of their subjects. Sethi et al (1977) could not find a single user of opium among medical students. From Patiala, Gurmeet Singh (1979) reported that 8.8% of medical students were lifetime user of opium, while 30 days prevalence of opium was only 1.4% and there was not a single heavy user. In the report from Chandigarh (Smart 1981) in non-student survey which was part of multicentred project on drug abuse among youth, six different samples were used: general population from urban and rural area, factory workers, rickshaw pullers (40%), workers in labour colonies and shop assistants. Only four drugs (Cannabis, amphetamines, tranquilizers and opium) were included for this study. Insufficient numbers of users of all drugs (4% or less had ever used them) were found in general urban population and among labour colony workers. Opium was used by 4.3% of rural population and 5.8% of the factory workers. However rickshaw pullers were by far the most frequent drug users: 15% had used cannabis, 7.5% amphetamines and 12.5% opium, but none has used tranquilizers. In the same report it was reported that in the past year, rickshaw pullers had used following drugs most frequently: 10% had used cannabis, 2.5% amphetamines and 10% opium. In the past month, there were no daily users of any drug except for one rickshaw puller who used cannabis and opium daily. Low reporting of opium use in our sample is difficult to explain. It may be because of strong check of illicit trafficking of the opium in Punjab during study period when Punjab was under Governor rule and large number of military and paramilitary forces were deployed or because of under reporting of its use because of fear of stringent punishment. Could this low reporting of opium may reflect a change in the trend of its use in the past few years is difficult to conclude from this study.

In our study most of rickshaw pullers were taking drugs to keep themselves awake/alert, out of curiosity, to overcome boredom, and to induce sleep. Only few took it for sake of company, to celebrate certain occasions, to increase physical strength, to get rid of fatigue and to get plea-
Several reports are emerging from different parts of the country about the drug use amongst various population groups. At present there is a considerable need and scope to standardise the methodologies employed in such studies. As has been earlier pointed out by Varma (1977) there is a greater need for more prevalence studies on non-medical use, abuse and dependence of drugs in various populations using rigorous methodology to give a composite picture of the problem. Presently we need comprehensive information about the prevalence and nature of drug abuse in labour class in India. Besides other physical and psycho-social problems of use of these substances also exhausts their limited financial resources and further drives them towards poverty.

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