

Prevalence of Drug Abuse Amongst The Youth of Jalandhar, Punjab: A Comprehensive Study

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Abstract

Drug abuse and misuse has assumed a magnificent form in the contemporary times, particularly effecting young people with detrimental effects on individual and the society. The principal objectives of this study are (i) To examine how widespread drug abuse is among the youth in Jalandhar district, Punjab; (ii) To determine the nature and extent of drug usage and (iii) To assess the effects of drug addiction on the physical and mental well-being of the individuals involved. To conduct this study, 500 random individuals from Jalandhar district, Punjab were surveyed. The study unveiled a deep connection between drug abuse, employment, and education level with poly-drug abuse and age-of-initiation. In the end, a list of possible suggestions has been included which can address this dangerous state of events relating young people.

Keywords: *Drug abuse, Education, Poly-drug abuse, Youth, Human resource*

Introduction

Meaning and Definition

The worldwide prevalence of drug misuse is a major problem today. Each year, smoking, alcohol, and drug usage claim the lives of millions of people. The economy and human resources are both harmed. Anyone can fall prey to drug addiction at any time in their lives if they are negligent, regardless of their age. Researchers have found that many young people take substances such as Gutka, Tobacco, Pauches, cough syrups, proseywon, dormant 10, discephan pills, corex phenydrile, and cough syrups containing codine sulphate.

If ingested by a living body, any substance will alter some aspect of its functioning, as stated by the World Health Organization. The drug is used to alter or sustain an emotional state, and it may have negative effects on the user as well as on society. When someone develops an addiction to drugs or alcohol, their body no longer functions normally without those substances. For example, an addict's mental and behavioral state may change to the point that he or she poses a danger to themselves or others when under the influence of an addictive substance. Addiction makes it difficult for a person to abstain from drug use.

Nature and Impact of Drug Abuse

Substance abuse, or drug abuse, is the chronic and harmful use of drugs. When it comes to drugs, the line between abuse and addiction is extremely thin. When someone is abusing drugs, they may or may not get addicted to them. In contrast, a drug addict is completely dependent on their drug of choice. As a result, drug abuse frequently results in drug dependence. Substance misuse can be seen as both an abnormal activity and a major societal issue. It can be understood in two ways: first, as a symptom of an individual's social discord; second, as a systemic problem with negative effects on society at large. While drug abuse has been recognized as a major social issue in the West for quite some time, it has only been in the last three decades that this is the case in India.

In addition to being a major drug transit hub (from which narcotics are trafficked from some nations and sent to others), India's drug use prevalence is reportedly on the rise. An estimated one million people in India are heroin addicts. It is believed that between Rs 10,000,000,000 and Rs 20,000,000,000 is made annually from the illegal drug trade in India. Similarly, the amount of illegal narcotics confiscated has grown dramatically over time. Addiction to illegal substances is on the rise among kids from all socio-economic backgrounds, not just the poor.

Effects of Drug Abuse and Their Causes

Stimulants, inhalants, cannabinoids, depressants, opioids and morphine derivatives, anabolic steroids, hallucinogens, and prescription medicines are the eight main types of drugs that can be abused. Stimulants rev up the neurological system and give you a burst of extra pep in your step. 'Uppers' is another name for them because of how alert they make you feel. In contrast to depressants, stimulants are known to increase activity. When the stimulant's effects wear off, the user is often left feeling ill and exhausted. Consistent use of these substances can have devastating consequences for the user.

Drug Abuse Amongst Youth

The origins of drug misuse are a topic of much speculation. They have various causes, including genetics and individual traits. Problems with discipline, motivation, dissatisfaction, anxiety, boredom, and socialization often accompany substance addiction in young people. These features are indicative, but not definitive. Adolescents who abuse drugs or alcohol are as diverse as the substances themselves.

Most youngsters experiment with drugs and alcohol. If the child is just exploring, this activity will occur rarely

or only a few times before the youngster stops trying new drugs altogether, which is the first step in the four-stage progression to addiction. Followed by abstinence, this is the most common stage of adolescent substance abuse before the youngster progresses to regular usage. Dependence is the last and last phase. Teenage drug and alcohol misuse can have its roots in a child's natural propensity to defy authority. Some influencing factors can be:

- Teens with low self-esteem generally struggle with low self-confidence and insecurity. Some drug and alcohol use could have this as its foundation.
- Teenagers who experience social difficulties with their age peers or the opposite sex may find that drugs or alcohol help them relax and open out to their peers.
- Some teens self-medicate with booze and drugs. Depression, pessimism, and unhappiness are at the heart of their emotional struggles. These medications appear to be helpful in reducing symptoms.
- Some of these young people partake because they love the euphoric effects of intoxicants and drug use.

Substance misuse is a learned trait that can be picked up through three different types of social interaction: persuasion, unconscious imitation, and reflective thought. In a survey asking where people obtained drugs, the most common responses were (i) friends, acquaintances, family members, and the home cupboard; (ii) doctors and hospitals were used more frequently by girls than boys; and (iii) friends were the most frequently mentioned non-medical source.

Literature Review

Palmer (2014) identified various factors associated with drug abuse among adolescents, including divorce, absent parents, absent father, low family cohesion, lack of closeness within the family, and communication issues. According to Fagan (1989), drug-abusing adolescents perceive their parents as having less control over the family. Johnson and Pandina (1991) conducted a three-year study involving 1,380 adolescents and found that the quality of child-parent interactions, rather than parental alcohol use, was linked to the adolescents' drug use, delinquency, and reliance on emotionally focused coping strategies.

Gilbert (2014) presented an alternative perspective on human maturity, stating that individuals differ in their ability to adapt and effectively deal with life's challenges and achieve their goals. The level of basic self is influenced by a person's capacity to separate their emotions from their primary relationships while maintaining emotional

connections with important individuals in their life. However, there is a contradiction in these ideas: individuals with a solid sense of self and life direction are more capable of engaging in meaningful and open communication within relationships, whereas those excessively fused with others may struggle to maintain healthy adult attachments. The need for attachment drives enmeshment in relationships.

Anderson and Sabatelli (2014) expanded on the concepts of differentiation and individuation, often used interchangeably. Individuation refers to the developmental process of separating oneself from identification and dependence on others, which holds particular significance during infancy and adolescence. Differentiation, on the other hand, is distinct from Bowen's notion of differentiation and pertains to the level of fusion or emotional neediness within a family system. Higher levels of differentiation reduce the constant search for love, approval, or affection within a family, decrease the tendency to blame others for unmet needs, and enable family members to engage in adaptive, age-appropriate, goal-directed behaviors.

Well-differentiated family systems allow for age-appropriate individuation, enabling young adults to experience both intimate connections and independent functioning. In contrast, poorly differentiated family systems exhibit dependence or disengagement among family members, leading to age-inappropriate individuation, where children lack clear identity, boundaries, and the ability to set life directions. As these children grow into adults, they either remain fused with others, including their parents, or attempt to separate by disconnecting from significant relationships.

Tobler and Stratton (2014) conducted a meta-analysis of school-based prevention programs and found that interactive programs (e.g., social influences and skills programs) had greater effects compared to non-interactive programs (e.g., knowledge-based programs). Interactive programs were particularly effective with illicit drugs other than cannabis but equally successful in addressing cigarette, cannabis, and alcohol use.

In a review of drug prevention programs in schools, Cuijpers (2014) identified key components that contribute to program effectiveness. These included proven effects, interactive delivery methods, interventions based on the "Social Influence Model," focus on norms, commitment to not using drugs, and intentions to avoid drug use. Additionally, community interventions and the inclusion of life skills within programs were found to enhance their impact.

According to Tobler et al. (2015), there is strong evidence indicating that interactive methods (e.g., role play) for

delivering drug prevention interventions are more effective than non-interactive methods (e.g., lectures) in reducing drug use. Interactive approaches provide students with opportunities to communicate, receive feedback, receive constructive criticism, and practice refusal skills with peers.

The issue of drug addiction, particularly heroin addiction, among the young generation in the union territory of Jammu and Kashmir has become increasingly problematic. Drug trafficking and the illegal cultivation of opium within the region have had a significant impact on the youth. Given its geographical location, Jammu and Kashmir is highly vulnerable to the illegal routing of drugs, particularly heroin, from Pakistan. Considering this, the present study by Esther (2022) aims to examine the socio-demographic profile of substance abusers attending the Lifeline Rehab drug de-addiction center in Kathua district, Jammu. By understanding the socio-demographic characteristics and commonly consumed substances among the youth, this research seeks to shed light on the prevailing patterns of drug abuse in the region, which can inform targeted interventions and policy measures to address this pressing issue.

Objectives of The Study

- To examine how widespread drug abuse is among the youth in Jalandhar district, Punjab.
- To determine the nature and extent of drug usage and identify the sources through which drugs are supplied.
- To investigate the socio-economic backgrounds of individuals who abuse substances by means of case studies.
- To assess the effects of drug addiction on the physical and mental well-being of the individuals involved, also involving chi-squares methodology.

Methodology

The study employed a mixed-method approach, utilizing both qualitative and quantitative methods. The research design involved a survey questionnaire and semi-structured interviews with the citizens of Jalandhar, Punjab on the menace of drug abuse. The survey questionnaire was distributed among 500 randomly selected citizens of Jalandhar, Punjab. The participants were assured of the confidentiality of their responses, and their consent was obtained before the data collection. Additionally, in-depth interviews and focus group discussions were conducted with key stakeholders, such as government officials and citizens, to understand the deeper reasons, impact, and significance of the issue in

the contemporary times. Name of the study, authors, location, year, sample size, type of problem addressed, techniques utilized, findings, and suggestions were among the columns in Excel. Case Studies and Chi-square methodology has been used.

Data Interpretation & Analysis

Figure 1 displays the overall distribution of respondents categorized by age groups. Most respondents fall below the age of 30. The smallest proportion (6%) belongs to the age group of 16-19 years. It is worth noting that even teenagers are not only aware of drugs but also have developed a habit of consuming drugs to such an extent that they require hospitalization for treatment. Equally significant, if not more, is the fact that approximately 60% of the respondents belong to the crucial period of their lifespan (25-29 years) when they are expected to be highly productive, energetic, and open to change. Unfortunately, this creative period is completely ruined due to the harmful consequences of drug use. As a result, our country is deprived of the potential contributions from this important demographic.

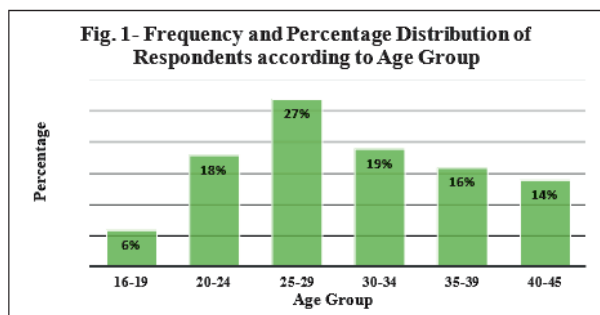


Table 1 illustrates that among the respondents, 26% are illiterate, while the highest proportion (32%) has a primary level of education. The observed fluctuation in the frequency distribution of respondents based on their education level indicates a consistent relationship between drug addiction and educational background. In other words, most addicted individuals tend to have lower levels of education.

Table 1 Frequency and Percentage of Distribution of Respondents according to Educational Qualification

S. No.	Educational Qualification	Frequency	Percentage
1	Illiterate	130	26%
2	Primary	160	32%
3	Matriculation	70	14%

4	H.S.C.	100	20%
5	Graduation & above	40	8%
Total		500	100%

The distribution of respondents according to their occupation (Table 2 & figure 2) reveals that the unemployed group is more susceptible to drug use compared to other groups. Among the different occupation categories, the percentages of drug users are as follows: labor class (12%), government servants (8%), business group (4%), and other groups such as private job holders and unskilled workers (14%).

Table 2 Frequency and Percentage of Distribution of Respondents according to Occupation

S.No.	Occupation	Frequency	Percentage
1	Unemployed	310	62%
2	Laborer	60	12%
3	Government Servant	40	8%
4	Business	20	4%
5	Any other	70	14%
	Total	500	100%

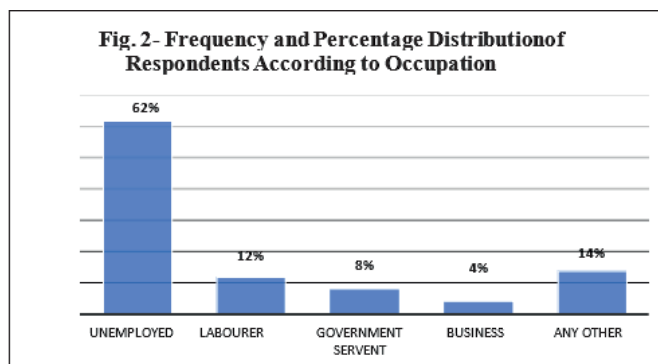
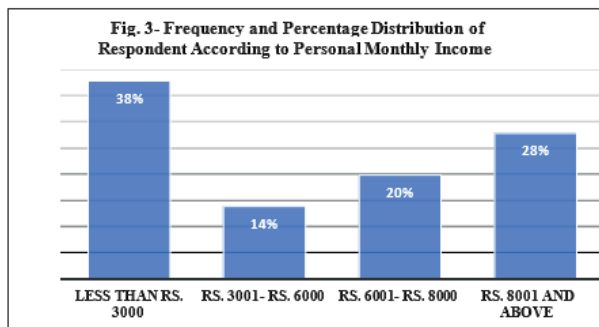


Table 3 and figure 3 provide information on the income levels of the respondents. It indicates that 14% of respondents belong to the lowest income group, while 38% belong to the highest income group. This suggests that a significant portion of respondents (28%) who are economically dependent are still vulnerable to falling victim to dangerous drugs. Income may play a role in combination with other factors, rather than on its own, in influencing drug use. In fact, variables such as education, occupation, and income are interconnected, and the complex interplay among them may shed some light on drug use patterns.

Table 3 Frequency and Percentage Distribution of Respondent According to Personal Monthly Income

S.No.	Personal Monthly Income	Frequency	Percentage
1	Less than Rs. 3000	190	38%
2	Rs. 3001- Rs. 6000	70	14%
3	Rs. 6001- Rs. 8000	100	20%
4	Rs. 8001 and above	140	28%
Total		500	100%



The provided table 4 and figure 4 show the overall percentage distribution of respondents based on the type of drugs they first used. Among the respondents, 42% started with heroin, 17% used charas, 9% used opium, 26% used bhang/cannabis, and 6% used other drugs initially. "Others" can include many other dangerous drugs.

Table 4 Frequency and Percentage Distribution of Respondents According to Type of Drug(s) First Used

S.No.	Name of Drug(s)	Frequency	Percentage
1	Heroin	210	42%
2	Charas	85	17%
3	Opium	45	9%
4	Bhang/Cannabis	130	26%
5	Others	30	6%
	Total	500	100%

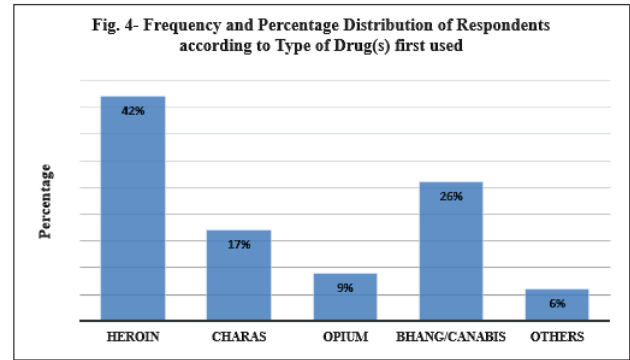
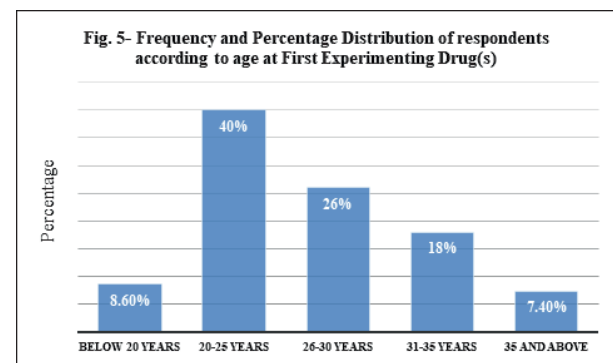


Figure 5 illustrate the age distribution of respondents when they first experimented with drugs. The highest occurrence of drug experimentation falls within the age group of 20-25 years, while individuals above the age of 35 are less likely to have experimented with drugs at an earlier stage.

The table 5 and corresponding figure 6 provides an overall percentage distribution of respondents based on the drugs they are currently using. Among the respondents, 60% are using only one drug, 22% are using two drugs, 12% are using three drugs, and 6% are using four or more drugs.

Table 5 Frequency and Distribution of Respondents According to the Number of Drug(s) Being Used

S. No.	How many drug(s) do you use at present?	Frequency	Percentage
1	Only 1	300	60%
2	Two	110	22%
3	Three	60	12%
4	Four or more	30	6%
		500	100%

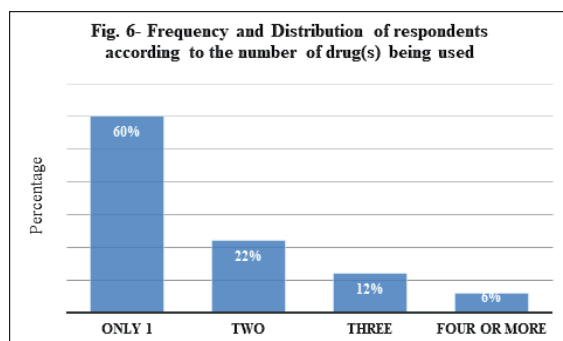


Chi-Square Analysis

Table 6 Chi-square based on Age and Drug Type

			Heroin	Charas	Opium	Bhang	Other	Total	Chi-Square
AGE	16-19	Count	1	2	4	15	8	30	79.630**
		Column N%	0.50%	2.40%	8.90%	11.50%	26.70%	6.00%	
	20-24	Count	25	20	8	30	7	90	
		Column N%	11.90%	23.50%	17.80%	23.10%	23.30%	18.00%	
	25-29	Count	75	15	13	26	6	135	
		Column N%	35.70%	17.60%	28.90%	20.00%	20%	27%	
	30-34	Count	33	23	5	29	5	95	
		Column N%	15.70%	27.10%	11.10%	22.30%	16.70%	19%	
	35-39	Count	39	12	10	19	0	80	
		Column N%	18.60%	14.10%	22.20%	14.60%	0%	16%	
	40-45	Count	37	13	5	11	4	70	
		Column N%	17.60%	15.30%	11.10%	8.50%	13.30%	14%	
	Total	Count	210	85	45	130	30	500	
		Column N%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	

Note: **Significant at 0.01 level



The study's findings indicate that youth considerably differ in their drug use according to their age factor and kind of addiction, as seen by their chi-square values of 79.630, which are significant at the 0.01 level. The table's results also demonstrate that most respondents, or 35.7%, who reported using heroin were between the ages of 25 and 29.

Table 7 Chi-square based on Education and Drug Type

			Heroin	Charas	Opium	Bhang	Other	Total
Education	Illiterate	Count	47	17	16	44	6	130
		Column N%	22.40%	20%	35.60%	33.80%	20%	26%
	Primary	Count	75	26	9	43	7	160
		Column N%	35.70%	30.60%	20%	33.10%	23.30%	32%
	Matriculation	Count	28	15	5	17	5	70
		Column N%	13.30%	17.60%	11.10%	13.10%	16.70%	14%
	H.S.C.	Count	40	20	10	20	10	100
		Column N%	19%	23.50%	22.20%	15.40%	33.30%	20%
	Graduation & above	Count	20	7	5	6	2	40
		Column N%	9.50%	8.20%	11.10%	4.60%	6.70%	8%
	Total	Count	210	85	45	130	30	500
		Column N%	100%	100%	100%	100%	100%	100%

Table 7.1 Chi-Square Test

Pearson Chi-Square Tests		
		VAR00009
Education	Chi-square	20.292
	df	16
	Sig.	.207ns

**Significant at 0.01 level

The study's results demonstrate that youth take drugs in considerably different ways depending on their education factor and kind of addiction or substance, as their chi-square value is 20.292, which is significant at the 0.01 level. The chart also demonstrates that most respondents, 35.7% with a primary education, use heroin in district Jalandhar, Punjab.

Table 8 Chi-square based on Income and Drug type

			Heroin	Charas	Opium	Bhang	Other	Total
Income	1	Count	90	30	18	45	7	190
		Column N%	42.90%	35%	40.00%	34.60%	23%	38%
	2	Count	25	17	10	10	8	70
		Column N%	11.90%	20.00%	22%	7.70%	26.70%	14%
	3	Count	40	23	11	25	1	100
		Column N%	19.00%	27.10%	24.40%	19.20%	3.30%	20%
	4	Count	55	15	6	50	14	140
		Column N%	26%	17.60%	13.30%	38.50%	46.70%	28%
Total	Total	Count	210	85	45	130	30	500
		Column N%	100%	100%	100%	100%	100%	100%

Table 8.1 Pearson Chi-Square Test

Pearson Chi-Square Tests		
		VAR00009
Education	Chi-square	38.389
	df	12
	Sig.	.000**

**Significant at 0.01 level

The study's results demonstrate that youth take drugs in considerably different ways depending on their financial element and kind of addiction or substance, as their chi-square value is 38.389, which is significant at the .01 level. The data also reveals that 42.9% of respondents with an income of \$3000 or more use heroin in both urban and rural locations.

Case Studies from The Relevent Field

Case Study 1

The respondent in this case is a 22-year-old man whose parents are divorced and living separately. His

father is a science graduate and works as a teacher in a government school, while his mother is a postgraduate and employed. He currently lives with his mother and is unemployed. Despite obtaining a commerce degree, he cannot continue his studies due to a lack of proper guidance. He attributes his addiction to drugs to the absence of affection, love, guidance, and boredom. Since his mother is frequently away from home due to work, he feels lonely and influenced by boredom, leading him to believe that no one loves him. He believes that drugs can change his mood and temperament and help alleviate his feelings of loneliness. He mentions that drugs are easily accessible to him, but he is uncertain about his father's reaction to his drug use. On discovering the truth, his mother was shocked and wished to take him to a de-addiction center for his recovery. Despite never feeling the need to completely give up drugs and lacking the desire to do so soon, he is compelled to undergo treatment at the recovery centers.

Case Study 2

In this case, the respondent is a 32-year-old man who willingly participates in the interview and eagerly shares his perspectives with the researcher. His parents passed away a few years ago, with his father being a small farmer and his mother a housewife. He currently holds a non-governmental job and has a two-year-old son who lives with his mother. The respondent follows the Hindu religion and has only completed his 10+2 (senior secondary) education. His father was an alcoholic who showed little interest in educating his children, often spending his earnings on alcohol consumption. The respondent experienced significant psychological distress after separating from his wife, leading him to turn to drugs as a means of escaping these feelings. Maladjustment was a major factor contributing to his divorce, with psychological abnormalities also playing a role. He initially started with ganja three years ago and later began using substances such as hashish, marijuana, heroin, brown sugar, and even cough syrup due to its lethargic effects. He consumed drugs wherever and whenever, including at home. He admits that he is unwilling to refuse drugs unless pressured by others and that his experience with drugs varies depending on his mood. Sometimes he seeks solitude, while other times he becomes talkative and seeks companionship. Although he acknowledges that his relatives consider drugs to be harmful to health, he continues to use them out of boredom and to cope with marital problems. His primary objection to drugs revolves around health concerns. Initially, he tried to quit using drugs due to negative experiences and weight loss, as drug use prevented his participation in social activities. However, he resumed using drugs when faced with boredom and psychological restlessness.

Case Study 3

In Case Study 3, the respondent is a 22-year-old student and the second of three brothers from a Hindu family. His father completed education up to the higher-secondary level. Currently, he has started his own business and earns more than RS. 5000 per month. His mother is a housewife, and his other two brothers are also students. He attended an English medium school for his schooling and is currently pursuing a B.A. degree. His plan is to study law after graduation. Initially, he wanted to study science in the degree course, but he faced disappointment and frustration when he couldn't secure his desired science subject. This situation led him to feel extremely frustrated and tense, and his parents' disapproval worsened his state. It was during this time that he turned to drugs. However, he has since stopped taking drugs and has discontinued using heroin and brown sugar. Gradually, he began using only heroin as

it provided a better experience for him. He preferred not to be alone while taking drugs and sought the security and support of his friends. Eventually, he stopped taking drugs at home out of fear of being discovered, possibly because one of his friends informed his parents. As a result, his parents took him to a recovery center. In the beginning, he took drugs at a friend's house, taking them regularly, approximately four times a week, when his parents were away for a few months. During this period, he was able to consume drugs at home. Currently, he has successfully overcome drug use through psychological treatment and the support of the recovery center. He is now performing well in his studies.

Discussion

The issue of drug addiction has emerged as a significant problem, impacting numerous individuals, including the youth who are crucial for shaping the future. The younger generation, often considered the backbone of any country, faces adverse psychological and physical effects due to the harmful nature of narcotic drugs. This detrimentally hinders the holistic development of our nation. The severity of drug abuse can be measured by the increasing number of injecting drug users, which has led to the spread of blood-borne diseases such as Hepatitis and HIV/AIDS. Over the past five years, the number of drug addicts has grown alarmingly, directly, or indirectly affecting individuals, families, and society, resulting in psychological, social, and economic repercussions.

The problem of drug abuse poses a significant threat to society, affecting various social strata. Therefore, it is crucial to comprehend the dimensions and seriousness of this problem and urgently identify the socio-economic factors underlying drug addiction. To address this issue, a serious and systematic effort is required to tackle the causes of drug abuse. In this regard, the present study aims to focus on individual cases of drug abuse. Unfortunately, parents often remain unaware that their children are engaged in drug abuse, sometimes discovering the problem only when their children are arrested by the police. Parents lack knowledge about recognizing the initial signs of drug abuse in their children and fail to realize that seemingly innocent activities such as smoking cigarettes or consuming alcohol can serve as the first steps towards drug abuse. Peer group pressure heavily influences children and adolescents who abuse drugs, and they strive to conceal their actions, making it challenging for teachers and parents/guardians to become aware of the situation. Thus, the researcher decided to directly question adolescents who abuse drugs to gain insights and empower all stakeholders in dealing with this problem.

Early age of initiation and poly-drug usage is another angle that often gets ignored when one studies substance abuse. While early age of initiation can derive its roots from bad influences, bad company, and easy access to illicit substances, it can severely alter the development process of the person especially if they are minor. Also, not to forget the lifelong implications of prolonged substance use. It is also noticed from this study that the longer the person has been dependent on a particular substance, the harder it gets to seek help and recover. Poly-drug abuse can prove to be lethal and potentially life threatening when the substance users are consuming two, or sometimes even more substances together to achieve a higher sense of "high" or intoxication. This can lead to impairment of senses and a diminished sense of self-control, aversion and conscious.

The multifaceted problem of drug abuse cannot be addressed through a single approach. It necessitates comprehensive measures from various perspectives. Traditional teaching methods alone are insufficient, particularly when dealing with illiterate or semi-literate individuals struggling with addiction. Previous research has examined the issue from different angles, including medical and legal aspects, while others have highlighted socio-economic factors contributing to the problem. However, these studies have been inadequate in effectively combating the menace of drug abuse since they focused on singular aspects to resolve the problem.

It is anticipated that the findings of this study will enable prevention program implementers to pay adequate attention to pertinent environmental, social, and personal factors that play a critical role in preventing drug abuse. The outcomes of this study, highlighting what constitutes effective prevention programs, can greatly contribute to positive changes in drug abuse prevention practices, which can be replicated in other educational institutions. The control of drug abuse can be achieved through the implementation of the following strategies:

To prevent drug abuse, parents can: (i) **foster open communication** with their children, patiently listen to their problems, and teach them problem-solving skills, (ii) **take interest** in their children's activities and social circles, and (iii) **set a positive example** by abstaining from drug use themselves.

Another technique that that can be employed to speed up the process of recovery is to invest in upskilling. Transitioning from a state of mind that is dependent on a particular substance to one that is conscious about its decisions, is not an easy task. It needs a variety of different strategies. This is where upskilling or simply "learning something that one enjoys doing" can really

help. Not only does it divert the person's mind from the repeated urge to indulge in something wrong but can also reestablish dopamine responses of the mind to activities other than substance use. Also, this new skill can empower the person socially and economically, reduce stigma and bridge the gap between them and the society.

Conclusion

Therefore, we can conclude that drug addiction has become a significant problem, particularly among the youth, with severe psychological, social, and economic repercussions. Traditional approaches have proven inadequate in addressing the multifaceted nature of drug abuse. This research emphasizes the importance of effective prevention programs that target social and environmental factors, aiming to discourage initial drug use and prevent its progression. By evaluating and refining prevention practices, this study seeks to empower stakeholders and create positive changes in drug abuse prevention, contributing to a healthier and more prosperous future for individuals and societies.

Recommendation

Assessing the effectiveness of prevention programs: It is crucial to comprehending the dynamics of drug abuse. This understanding is vital for formulating and revising drug abuse policies to improve the situation in Punjab. From the perspective of this study, only effective prevention programs possess the capacity to accurately address the core issues of drug abuse prevention. Therefore, assessing effectiveness is necessary to refine and establish the key elements of prevention.

Providing drug education: Targeting young college/university students, particularly those living in hostels and away from parental supervision, as well as individuals residing in slums, industrial workers, truck drivers, and rickshaw pullers. The educational approach should actively engage people and promote the exchange of valuable information. Effective education should dispel misconceptions about artificial euphoria and instead provide authoritative knowledge on the physical and psychological effects of mood-altering drugs, their pharmacological properties, and medical uses. Parents should also play a crucial role in imparting this education.

Changing physicians' attitudes: Encouraging doctors to exercise caution in prescribing excessive amounts of drugs can significantly contribute to drug abuse control. Physicians should be more mindful of the potential side effects of medications. While drugs may provide relief, there is a risk of over-reliance. Often, patients receive a prescription that successfully treats their ailment, leading

them to continue using the drugs indiscriminately or excessively whenever they experience the same ailment. This practice of relying more on medication than on medical advice is dangerous.

Emphasizing the role of parents in controlling drug usage among their children. Parental neglect, hostility, rejection, and marital discord contribute to drug addiction. Therefore, parents should prioritize maintaining a supportive and harmonious family environment. As addiction is a gradual process marked by declining interest in studies, activities, and hobbies, irresponsible behavior, irritability, impulsive conduct, and a vacant expression, parents can identify early signs by remaining vigilant. They can ensure that their child withdraws from the habit.

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