

Drug Abuse an Intoxicated Web Around Youth. Case Studies of Abusers of Jammu.

¹Priyanka Sharma.

Abstract.

Drug abuse is a menace that is spreading among youth at an alarming rate. The vicious cycle of abuse is a life-threatening experience, which needs to be broken at any cost. The present paper is an analysis of case studies of three abusers undergoing treatment in the drug addiction center. The peep into the cases gives an understanding of the precipitating/ triggering factors pushing youth towards drug usage. The case studies also indicate personality profiles which are more prone to abuse. In addition, stressors and stimulators in life pushing youth towards abuse are also analyzed. Introspection by the abusers and family members indicates possible preventive plans for the vulnerable groups and for other significant people around them.

INTRODUCTION

A drug is an intoxicating substance that when consumed, affects the body and mind of a person. There are various ways of taking these narcotics, for instance- they can be injected, inhaled, smoked, or absorbed. When taken it causes temporary physiological and psychological changes in the body of the respective person. People who take drugs hurt themselves and the people around them. This involves families and communities at large. Drugs use lead to addiction. An addiction is a long-lasting brain damage or disease. Addicted people cannot stop taking drugs. They continue taking drugs even when they know that it has negative effects. Once addiction sets in, the disease usually circulates and becomes out of their control.

Drug addiction is a complex illness. It is characterized by intense and at times, uncontrolled drugs craving, along with compulsive drug seeking and use that persist even in the face of devastating consequences. It is a complex disease that requires integrated treatment of the mind, body, and spirit. It is considered as a brain disease because drugs change the brain, they change its structure and how it works. Without treatment, these brain changes can be long-lasting. Addiction is chronic, it is progressive and if left untreated, it can be fatal. The drug is a complex phenomenon that has various social, cultural, biological, geographical, historical, and economic aspects. Drug abuse, misuse and abuse occur primarily due to the nature of the drug abused, the personality of the individual, and the addict's immediate environment. Drug abuse has undoubtedly led to a detrimental impact on society. No part of the world that is free from the cause of drug trafficking and drug addiction. Millions of drug addicts, all around the world are leading miserable lives between life and death. People use drugs for different reasons, to escape from mental pain, trauma or abuse, mental illness, low self-esteem, relationship problems, loss of a loved one's due, to stress, chronic pain, or medical conditions. The initial decision of people to take the drug is voluntary. But when they are engaged in the cycle of addiction, the neural pathways in their brain change and they are not able to control their behavior. Every person who takes drugs is not addicted to them. There is not a single factor that can predict whether someone will be addicted to the drug or not but there are social, biology & environmental factors that increase the risk.

Drug abuser falls prey to multiple health problems such as: -

Drug and drugged driving, familial stress, child abuse, and the person contracting and spreading infectious diseases such as HIV, AIDS, and hepatitis. Commonly abused drugs are Alcohol, Anabolic steroids, Club drugs, Cocaine, Heroin, Inhalants, and Marijuana.

¹ Assistant Professor, Department of Lifelong Learning University of Jammu, Jammu, Email: pri.lot2000@gmail.com

Drug abuse usually breaks-up into stages: -

Stage 1, people using recreation purposes.

Stage2, you become regular to it, and your behavior changes.

Stage 3, the daily preoccupation stage, the abuser does not care about life without drugs.

Stage 4, in the last stage, the abuser is unable to face life without using drugs, one's financial and personal problems increase, and the risk that results in legal problems. Drugs are poisonous substances. The amount of drug taken determines the effects. A small number of drugs acts as a stimulant. A great amount acts as a sedative. Drugs directly affect the mind. It destroys a person's perception of what is happening around him. As a result, the person's actions become odd, irrational, inappropriate, and even distracting. Drugs block all sensations. Drugs blur memory, causing black spots. Drugs destroy the creativity of a person.

TYPES OF DRUGS:

Pharmaceutical drugs: These drugs are taken on the advice of a doctor for the cure of a particular disease, the intake of these drugs is mainly for making the body free from diseases and are consumed till the problem is solved completely. Pharmaceutical drugs are also called medicinal drugs or medication.

Pharmaceutical drugs are chemical substances used to treat, cure, prevent, or diagnose a disease or to promote well-being. Traditionally drugs were obtained through extraction from medicinal plants but more recently also by organic synthesis. So, these are consumed for a temporary period and are not addictive in nature.

Psychoactive drugs:

Psychoactive drugs are chemical substances that impact the nervous system of a person. In contrast to pharmaceutical drugs, these are taken by a person on his will not for curing diseases. Hence, these drugs are consumed for the comfort purposes only. They include alcohol, nicotine, caffeine, etc. Some of these drugs are addictive in nature and have a fatal impact on consumers. So, at the international level, awareness programs are introduced to control usage of these drugs.

Psychoactive drugs are chemical substances that affect the functioning of the central nervous system, altering perception, mood, or consciousness. Alcohol, depressant, and stimulants nicotine and caffeine are the most widely used drugs worldwide and are also considered recreational drugs since they are used for pleasure rather than medicinal purposes. These drugs can cause addiction and have side effects.

Hard and Soft Drugs:

Hard drugs are very strong and physically addictive and are illegal drugs these drugs bring about the most damage and are considered very harmful. Soft drugs are psychoactive substances that are minor addictive or less dangerous than the 'Laved Drugs' in the Netherlands, soft drugs are illegal. Marijuana, Synthetic marijuana, cocaine, Heroin, Inhalants, LSD (also known as molly). About 61% of high school students in Netherlands seems to have consumed alcohol first time in school. White alcohol is the most used drugs, but most recent studies show that marijuana is the most popular drug among the most frequently used drugs in the world. Marijuana is consumed by nearly 4.2 million people in India. Cocaine usage by 8,21,000. Though the rates of cocaine addiction in the United States is dropping.

EFFECTS OF DRUGS

The direct impact of drug abuse is seen to be on the brain which consequently affects every other aspect of the life of the person addicted to drugs. Drugs are primarily chemicals that affect the communication system of the human brain. They disturb the ways in which nerve cells send, process, and receive information. Drug use has negative impact on people who take drugs and the people around them. This includes families, kids, and unborn babies. Using drugs can also affect the body and brain of the person. Drug use usually leads to addiction because your body gets adapted and dependent on the substance abused. An addiction is a long-lasting brain damage or disorder. Addicted people compulsively cannot stop, constantly taking drugs even when they know about the potential harm.

MENTAL HEALTH:

Mental health is adversely affected by external forces such as drugs. Psychoactive drugs such as nicotine, alcohol, caffeine, stimulants, etc. can affect the mood of a person, such prolonged situations can further lead to depression, anxiety, paranoia, and other problems.

PHYSICAL:

The weight of a person starts fluctuating. The persistent consumer of an alcohol can gain a lot of weight over a period. However, it is generally seen that drug addicts start losing weight.

KINSHIP:

Drugs can have a harmful effect on family life. Most cases of drug abuse have disturbed families and broken marriages. Generally, drug-addicted people do not have an interest in social life & remain isolated from their family, friends, and relatives.

MONEY:

For a regular abuser of drugs, money is essential as drugs are a very expensive affair. Sometimes to fulfill the expenses, people also adopt the stealing practice, or teenagers are seen stealing money from their houses ultimately leading towards black marketing in the economy. The exchange of drugs between countries is an illegal activity.

DEPENDENT:

The drug dependence of a person on others also increases be it on a mental, physical, or financial level. Due to its severe consequences for health, they become weak so much so that they need the support of others, even to do their regular routine, and the same is the case on financial & mental levels.

CHANGE IN BEHAVIOUR:

Mood swings, lying to people, remaining isolated within the family & also being with friends. These are some of the signs of change in behavior due to drugs. Moreover, a drug addict is always worried about his acknowledgment of his real personality to people. In addition to this, they become short-tempered and it also leads to fights.

DRUG ABUSE IN INDIA:

International Day Against Drug Abuse and Illicit Trafficking is commemorated on 26 June every year to empower global action and cooperation toward achieving the goal of an international society free of drug abuse. According to the latest World Drug Report, released by the United Nations Office on Drugs and Crime (UNODC), globally 35 million people are estimated to suffer from drug use disorders while only 1 in 7 people receive treatment. It is the third-largest substantial business in the world today.

According to a UN report, drugs enter the cross-border illegal markets through various channels being diverted from India's pharmacy industry and smuggled from Afghanistan. The Report also estimates the growing number of opioid and other drug users across the world. Globally, 11 million people injected drugs in 2013, of whom 1.4 million live with HIV- AIDS and 5.6 million with hepatitis-C.

Cannabis, heroin, opium, and hashish are the most abused drugs in India after alcohol and tobacco. Drug users are mainly young and predominately male. Most drug users are in the productive age group of 18-35 years, the loss incurred in terms of loss of human potential is incomputable. The damage to the physical, psychological, moral, and intellectual growth of the youth is very high. It is estimated that in India amongst boys which reach the 9th class, about 50 % of them have tried at least one of the gateways of drugs.

According to the Delhi commission for protection of child rights on substances abuse conducted a study on children that 100% of child abusers conflict with the law at some point in their lives, while 95.5% of them staying in childcare institutions were on drugs and 93% of street children consumed narcotics. The study also states that 88% of children consumed drugs because of peer pressure. The other report stated that almost 74% of Indian homes have at least one member, an adult who is a drug addict. India has signed a bilateral agreement on drug trafficking within 13 countries including Pakistan and Bhutan. India has signed various treaties and conventions with UN to control the menace of drug abuse.

Following treaties and conventions:

1961 UN convention on narcotics drugs.

1971 UN conventions on psychotropic substances.

1988 UN conventions against illicit traffic in narcotics drugs and psychotropic substances.

2000 Transactional crime and convention.

Such an alarming statistics call for an urgent attention towards the issue (drug abuse) to be dealt on priority basis.

REVIEW OF LITERATURE

A peep into the past gives an indication/pattern of the issue investigated with some understanding of the dimensionalities of the topic under investigation. Research pertaining to drug addiction has revealed that edicts tend to mentally remain over-engaged with drugs and their thought only by ignoring the other vital aspects of life. Volkow, N. et al (2004) observed in a study that drug addiction is a compulsive drive to take a drug among youth despite being aware of the serious adverse consequences. This deviant behavior has traditionally been regarded as bad choices that are made voluntarily by an addict. Similar studies have shown that repeated drug use leads to long-lasting changes in the brain that threatens voluntary control.

Studies on drug usage reveal different patterns. Murthy, P. et al. (2010) analyzed substance abuse among adult users (41-50 years age group) in a study that found that the no. of drug abusers is increasing, nearly 14.2% of the population surveyed were found to be using hazardous drugs or

alcohol. According to the National Household Survey of Drug Use, Alcohol (21.4%) was the primary substance, and sed, cannabis (3.0%) and opioids (0.7%) and tobacco use prevalence were high nearly 55.8% among males.

The study conducted by Annabel, B. (2001) on young people for using psychoactive substances, comprised of a sample of 364 young poly-drug users engaged through snowball-sampling methods found that the highest used drugs by the sampled population were cocaine (96.2%) followed by cocaine hydrochloride (50.5%) and ecstasy (48.6%), and on an average, nearly 5.2% participants had used different psychoactive substances in their lives at some point of time.

Abusers' first exposure to drug use becomes a signifying factor in deciding their journey of drug abuse. The context or the situation/ circumstances the abuser is embedded in is equally crucial in deciding who falls prey to the first exposure and becomes a permanent part of the vicious abusive cycle. A study by Saxena, V. et al (2010) revealed friends/ peers were the ones who exposed the abuser to the drug. A similar study by Sani (2010) conducted a study on drug addiction also revealed that most of the respondents were dependent because of persuasion by friends and nearly equal number indulged in drug abuse with an urge to explore to do something new. The study conducted on substance abuse included 511 male adolescents from the Dehradun district of Uttarakhand, the data so collected was analyzed by using SPSS software. Benegal et al (2012) in a study revealed that most children abusing drugs come from broken families. Many studies conducted also reveal that abusers come from different family structures, though no comprehensive picture can be drawn, still some understanding can be drawn regarding the context the abuser is embedded in. The study conducted in urban slums in Bangalore by Sarangi et al (2008) reported that a significantly higher proportion of abused adolescents come from joint families. Similarly, a study by Naskar (2013) from Calcutta reported a significant percentage of drug users to come from business-class families. Some studies also highlight that most substance abusers had at least one family member who has already indulged in substance abuse. However, Sarangi (2011) reported a contrary finding, according to her, having a member in the family as an abuser serves as a deterrent and it is less likely to have an abuser from that family. A study by Abhay et al (2012) in a study also revealed that a significantly high percentage of substance abusers expressed their desire to quit the habit and at last majority of them take substances in the afternoon or evenings. This reflects the ambivalence and paradoxical situation the abuser is engaged in and gives input to the organizations involved in the drug-deaddiction programs to consider the context, personality profile, and precipitating factors affecting drug abuse.

Reza Hosseini, et al (2014) in his study aimed to determine the frequency of drug abuse by university students in Afghanistan and Iran in this cross-sectional study, 1,260 students volunteered (311 males and 949 females) within the age group of 21-35 years, collected data was analysed by using SPSS. The frequency of students who reported cigarette and tobacco usage was 12.6%, alcoholic drinks 4.7%, and opium and its derivatives 3.3% students reported that 38.2% of drug abusers in Iran abuse opium just for enjoyment and its euphoric effects and 19.4% for its narcotic effects to reduce physical pain, life stressors such as divorcing, living far from family and living in rental houses without family controlling role, could be related to drug abuse. The curiosity of young adults is also another important factor.

A study conducted by Navia deh, M. (2014) analyzed secondary data published in Iran during 2001-2002 related to substance abuse among students and revealed that the different types of drugs used abundantly in Iran were cigarettes and hookah, followed by alcohol, opium, ecstasy, hashish, and heroin. Also, Drug use is relatively high amongst the adolescents and effective age group of thirty. Jeans Christoffer Skogen et al (2014) studied the increasing use of alcohol and drugs among adolescents. This study was conducted to investigate the cross-sectional association between the onset of use of any alcohol or drug abuse and alcohol-related and drug-related problems and mental health issues associated with symptoms of depression, anxiety, inattention, and hyperactivity. This study indicated that abusive factors are general predictors of mental health in adolescence.

Drug addiction is a long-lasting brain disease causing physical and psychological cravings for mind-altering substances. The findings of a study where about 2.9 million people aged 12 and older were dependent on prescription drugs (either misused or possessed illegally) and approximately 2.2 million drug addicts were addicted to cocaine, heroin, or methamphetamine, 28.6 million people aged 12 and older (10.6 percent of the population) used an illicit drug at least once during any one month. However, it can be concluded that drug use and addiction are preventable, and teachers, parents, and healthcare providers have crucial roles in educating young people and preventing drug use and addiction.

Research Gap:

From the above review of literature, it is evident that though some research studies have been conducted on drug addiction among adults the knowledge gained from research, everyday practice in community-based drug abuse treatment programs, and governmental policy about drug abuse treatment at the local, state, and national levels. Much has been learnt about factors affecting drug addiction. Yet these groups make too little use of one another's knowledge base. There is a need to counsel adults about the negative impact of drugs on their present and future life.

To contribute to this gap, the present study has been undertaken to analyse the cases of drug deaddiction in Jammu city with the aim to identify the reasons and predisposing factors causing drug addiction among abusers.

Research objectives and methodology of the study

Jammu and Kashmir is a disturbed state that has already been facing so many losses and over the years, it has also come in the catch of drugs as well. Every now and then we hear in the news that police recovering drugs from very many vulnerable locations. Though the quantity of various types of drugs recovered has varied over different periods of time. However, it is an undisputed fact that the use of drugs by adolescents can be harmful physically, socially, and psychologically. An adolescent is not aware of their health and the harmful effects of taking drugs at an early age. They intake drugs for pleasure and they are unaware about the result of the abuse of drugs.

AREA OF THE STUDY

The area of present study is Jammu, which is the winter capital and the largest city in the Jammu District of the state of Jammu and Kashmir. Lying on the banks of the river Tawi, the city of Jammu, with an area of 26.64 km². Jammu is the second most populous city in the state. Jammu had an average literacy rate of 89.66%. The total population of Jammu city is 502,197. Males constituted 52.7% of the population; females numbered constituted 47.3% of the population. Commonly spoken languages are Dogri, Punjabi, Hindi, Gojri and other languages. The study is conducted in the said area because of certain reasons, the inhabitants of the area are facing stress and turmoil because of ongoing militancy situation, narco-terrorism being spread by bordering states.

OBJECTIVES OF THE STUDY

- To study the demographic profile of the drug addicts in Jammu city.
- To find out the predisposing factors behind drug abuse.
- To determine the impact of drug use and addiction on individuals, families, peers, and society.
- To study the effects of the user's dependency on specific drug use.
- To observe the patterns of behavioral changes amongst addicts.

RESEARCH METHODOLOGY

Research methodology is a way to systematically probe into research problems envisaged. It may be understood as a science of studying how research is done systematically. Research methodology is a sequential investigation of the problem methodologically.

Sample. The respondents selected for the present study consisted of adults in the age group of 18-35 years. Three respondents (abusers) case study was analyzed in depth to study the different angularities of the abusive behavior of the client. The Secondary data was collected from Mashwara Drug De-Addiction Centre and through interview/ interaction specific information about the drug usage pattern of each respondent was collected like the type of drug used, common occasions of drug intake, and predisposing factors behind drug use. Data thus collected was compiled and analyzed using qualitative data analysis technique (content analysis).

Data Analysis (Case 1)

Parameters.	Respondent profile.
Personal History	24-year-old unmarried Hindu graduate male.
Chief Complaints	Heroin Consumption. 1.5 grams per day. Approx. feeling of restlessness, running nose, muscle ache, headache, sleep disorder, decreased appetite, lack of social interest, loneliness, guilt feeling.
Stressor/ Precipitator	Depressive symptoms. bullying in school.
Informant Report	<ul style="list-style-type: none"> • Maintaining well in studies and sports prior to indulging into addiction. • Boarding school stress and bullying triggered the first intake of the drug. • Drug intake gave him temporary relaxation. Gradually started missing classes and caught in the vicious cycle of drug intake. • Aggressive behavior increased day by day, turning into disruptive behavior simultaneously.
Past psychiatric history	None.
Family history	Sister and mother were diagnosed with depressive symptoms.
Interpersonal/interpersonal relations,	Non-cordial relationship with family members specifically post-drug usage. The feeling of guilt, self-esteem, and valuing oneself low.
Relapse	Frequent relapse after every 2-3 months.

CASE 2

Parameter	Respondent profile
Personal History	Unmarried, B-tech dropout, Hindu boy admitted in Mashwira.
Chief Complaints	Heroin consumption, restlessness, watering of eyes, muscle aches, runny nose, unable to sleep properly, headache, decreased appetite, lack of social interest, feeling alone most of the time, guilt feeling.
Stressor/ Precipitator	No significant stressor or precipitator was found.
Informant Report	<ul style="list-style-type: none"> • Was maintaining well in studies and extracurricular activities. • Experimentation, curiosity, peer experimentation, and association dragged him into the vicious cycle of drug intake. • Family and friends' observations about his changed behavior post spending nearly a year in the engineering college gave reasons to his parents to pull him back from the college and eventually admit him to the de-addiction center. • He frequently absconded from the de-addiction center. As his addiction cravings increased, he got involved in drug peddling. Increased drug cravings eventually got him into stealing and subsequently in conflict with the law-and-order agencies.
Past medical history	He was taking treatment of HCV (Hepatitis C- a disease caused by a virus that attacks the liver and leads to inflammation and this virus is spread by contact with contaminated blood; for example, from sharing needles or from unsterile tattoo equipment) from past 3 months.
Past psychiatric history	On interview he reported that he consulted with various Psychiatrist and taken various rehab program but always got relapsed when he stops medication or regular follow-up.
Family history	No significant family history of abuse or any psychological disorder.
Interpersonal/interpersonal relations,	He has non cordial relationship with his family members.

CASE 3

Parameters.	Respondent profile.

Personal History	Thirty-four-year-old, married, 5 th pass, Hindu boy.
Chief Complaints	Consuming cocaine dosed about 0.5 grams per day, showing symptoms of tremors, restlessness, bodyache, and headache, increased irregular appetite, depressed mood most of the time, the feeling of loneliness.
Stressors/ Precipitators	Continual exposure to challenges and stressors in life. Death of his father at the tender age of 15, burdening him with family responsibilities and leaving his studies. Sequentially mother's deteriorating health and death further broke him more. His Depressive and Morone life led him to fall prey to friends who were abusers.
Informant Report	His family members' information reveals his disruptive behavior towards man and material, specially he was abusive towards his wife.
Past medical history	There was no significant was found.
Past psychiatric history	Consulted Psychiatrist on several occasions and was also on medication but did not continue and complete the treatment ever. About 2 years back, he was diagnosed with depression and currently on medication.
Family history	Normal, no significant history of any abusive or depressive history found in the respondent's family.
Interpersonal/interpersonal relations,	Non cordial relations with his family members specially with spouse and children.

CONCLUSIONS AND SUGGESTIONS

Drug addiction is a complex problem that results from a combination of psychological and environmental factors. Drug abuse and addiction is a major problem related to health and other social issues and have so many dimensions and disruptions which sometimes create numerous

implications in a person's life. The analysis of the case studies indicates the prevalence of menace of drug abuse among adolescents and adults of Jammu. The peep into the family environment of an abuser reflects the complex web of abuse pattern one is wrapped into. The uniform pattern of psychological, physical, and emotional torture of family members of the abuser is seen especially of wife, children, and parents. Drugs and its deadly usage affect the individual as well as the society.

Most of the respondents started drug abuse around 18-35 years of age, through their peer group as the frequent and in most cases first drug provider to them. Some respondents were also introduced to drugs by their friends. In addition to the external persuader's teenagers' own internal psychological makeup like curiosity, failure and family problems were also seen to be the common factors responsible for consuming drugs. Most of the respondents started with alcohol, heroin, and any other drug for the first time while in school only. Alcohol consumption is one of the usual addictive substances. All the respondents at some or other point of their life expressed their desire to quit. The family and friends even got them into drug deaddiction center, but the relapse rate is seen to be quite high in most cases. The reason for the high relapse rate can be attributed to the fact that body dependence is almost irreversible even after the first few consumptions of the drug. So, prevention seems to be the best strategy for breaking drug abuse patterns.

SUGGESTIONS

- Emphasis should be given to the preventive strategies and programs made by the government/non govt. organizations to reduce drug usage among the members of society. Prevention is the best way through which drug abuse can be dealt. Management should be effective, which will result in positive attitude formation.
- Ideally preventive programs should be organized for vulnerable age groups the drug takers, and rehabilitation centers at various checkpoints should also be opened.
- Media and other related channels should realize their strong influencing role in influencing the youth and should play a positive role by resisting the urge to earn and boost the youth to say no to drug abuse.
- Sustained treatment is only the way to fight the deadly issue.

References:

1. Abhay, B. M., Krishnakumar, M. K., Paul, C. N., & Shashidhar, G. H. (2012). Differences in perceived stress and its correlates among students in professional courses. *Journal of Clinical and Diagnostic Research*, 5(6),1228-1233

2. Annabel, B. (2001). Understanding reasons for drug use amongst young people. *Health education research*, 16(4), 457-469. Retrieved from
3. <http://faculty.buffalostate.edu/macleamg/440/Boys%202001%20HER.pdf>
4. Murthy, P., Manjunatha, N., Subodh, B. N., Chand, P. K., & Benegal, V. (2010). Substance use and addiction research in India. *Indian J Psychiatry*. 52(1):S189-99. doi: 10.4103/0019-5545.69232.
5. Nahvizadeh, M. (2014). A Review study of substance abuse status in high school students, Isfahan, Iran. *International Journal of Preventive Medicine*, 5(2), 77-82. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4476010/>
6. Reza Hosseini O, Roohbakhsh A, Tavakolian V, Assar S. Drug Abuse among University Students of Rafsanjan, Iran. *Iran J Psychiatry Behav Sci*. 2014 Summer;8(2):81-5. PMID: 25053961; PMCID: PMC4105608
7. Sani, M. N. (2010). Drug addiction among undergraduate students of private universities in Bangladesh. *Procedia Social and Behavioral Sciences*, 5, 498–501. Retrieved from doi:10.1016/j.sbspro.2010.07.131
8. Sarangi L, Acharya HP, Panigrahi OP (2008). Substance abuse among adolescents in urban slums of Sambalpur. *Indian Journal Community Medicine*. 33(4):265-7.
9. Skogen, J. C., Sivertsen, B., Lundervold, A. J., Stormark, K. M., Jakobsen, R., & Hysing, M. (2014). Alcohol and drug use among adolescents: and the co-occurrence of mental health problems. Ung@hordaland, a population-based study. *BMJ Open*, 22, 4(9). doi: 10.1136/bmjopen-2014-005357.
10. Saxena, V., Saxena, Y., Kishore, G., & Kumar, P. (2010). A study on substance abuse among school going male adolescents of Doiwala Block, District Dehradun. *Indian J. Public Health*, 54(4), 197-200.
11. Volkow, N. & Li, T. (2004). Drug addiction: the neurobiology of behaviour gone awry. *Nature Reviews Neuroscience*, 5(12), 963-970. Retrieved from doi: 10.1038/nrn1539.
12. <https://timesofindia.indiatimes.com/city/jammu/drug-peddler-arrested-in-jammu/articleshow/73900146.cms>