

Socio Demographic Profile of Late Childhood and Adolescence Abusing Cannabis

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Abstract

Adolescence is a transition period from childhood to adulthood. Along with many other conflicts, students at this age group are likely to encounter drug abuse for the first time. Identifying the socio demographic profile will help in prevention of substance use disorder to some extent. Objective: Identify the socio demographic profile of adolescents abusing cannabis. Methods: Data were collected from 100 patients from two de-addiction centres using a survey questionnaire after getting consent. Results: The demographic findings revealed that the majority 63% belonged to the age group of 15-20 years and the highest 64% of the samples were hailing from the urban area. Significantly, the prevalence of substance use is high among children from a nuclear family. Majority (42%) were belonging to high income family group (>30,000/month). Analysis of the family status revealed that among 100 samples, fathers of 62 patients were working abroad. In 92% of the cases there was family history of substance abuse. All these findings suggest that an in-depth study is needed to identify the role of demographic factors in cannabis abuse.

Key words: *Socio demographic profile, cannabis abuse, childhood and adolescence*

Introduction

Adolescence is a period of ongoing neurodevelopment that is linked with an increase in risk-taking behaviours, including the onset of substance use.¹⁻¹² Substance use causes problems related to increased mortality and morbidity among adolescents and contributes to various forms of mental illness and social complications.¹³⁻¹⁶ Moreover adolescence is a period with significant brain development. Cannabis use may be a risk factor which will affect the neurological development and cognitive function of adolescents adversely.¹⁷⁻¹⁹ Some studies found that association with friends who exhibited behavioural deviation including substance use lead to the early onset of substance use which may extend to adulthood as well. This substance use related morbidity can be reduced by early screening and implementation of treatment interventions.²¹ Researchers have identified that an ongoing survey is very relevant in the case of the identification of substance abuse as well as the socio demographic profile of children abusing substance^{22,23}.

Therefore, the researcher tried to examine socio-demographic profile among patients diagnosed with cannabis abuse admitted to a de-addiction centre.

Objective

To identify the socio demographic profile of patients seeking treatment in selected de-addiction centres

Methodology

Research design and sampling

A descriptive survey approach was undertaken to identify the socio demographic profile of patients seeking treatment for cannabis abuse in two de-addiction centres. A convenient sampling technique was adopted to select 100 samples who are attending the outpatient department of two de-addiction treatment centres. Informed consent was obtained from the participants as well as parents and those who are not willing to participate as well as those who have severe comorbid psychiatric disorders were excluded from the study.

Delimitation

The study is delimited to the patients seeking treatment from two deaddiction centres, Kozhikode district, Kerala

Tools and techniques

The socio-demographic questionnaire was used to collect the baseline information of study participants such as age, place of living, education, monthly income, and type of family, family history of substance use, parent’s marital status, and reason for substance abuse. Further, a survey questionnaire was used to collect details about cannabis abuse. The tools were developed after getting opinions from the experts.

Data collection and analysis

After obtaining permission from the institutional ethical committee, the researcher approached the participants. The participants were also given a detailed description of the study and informed consent was taken. Informed consent was taken from parents in case of patients who are less than 18 years of age. The questionnaire was distributed at the time of admission among the patients who satisfied the inclusion criteria.

The collected data were analysed using descriptive statistics.

Major findings of the study

The results revealed that the majority (64%) of the samples belonged to the age group of 15-20 years and 36 % of the sample belonged to the age group of 21-25 years. Most of them (64%) were hailing from an urban area and the remaining were from a rural area. Around 49% of the samples belonged to a high-income group. Their monthly family income was more than rupees 30,000. On examination of the type of family, 78% of the samples were belonging to the nuclear family. The remaining 22% were coming from a joint family. Almost 92% of the samples suggested a strong family history of substance abuse. For almost 62% of the samples, the duration of cannabis use is less than six months. In most of the cases, 62%, father working abroad to earn a livelihood. About 63% of the samples were staying in the hostel with friends. Among the family members who are abusing cannabis, 81% were fathers. For 80% of the samples, classmates were abusing cannabis. Peer pressure (36%) and curiosity (33%) were the two reasons for abusing cannabis.

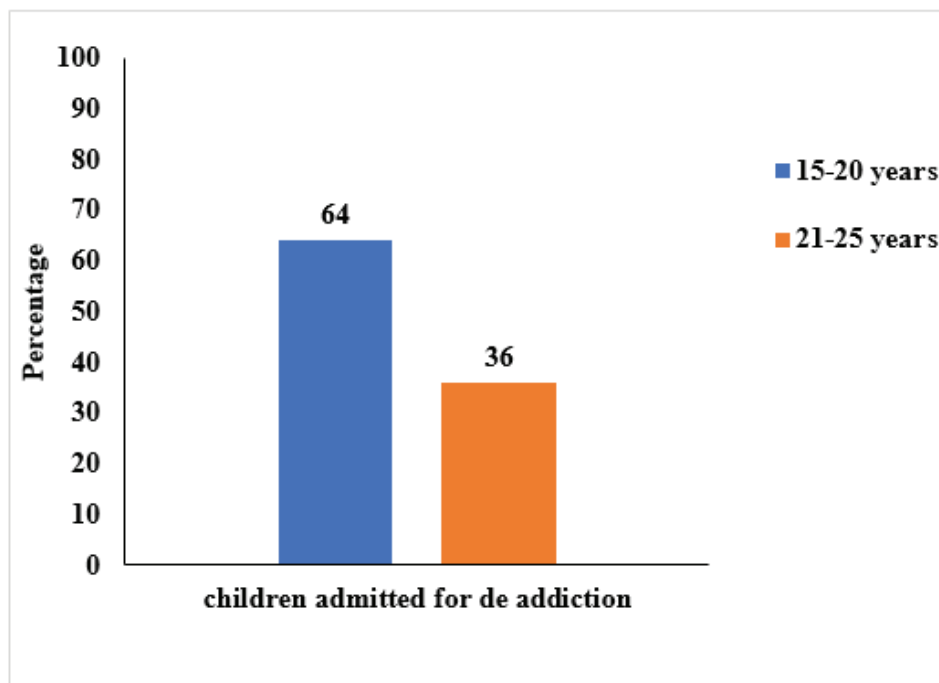


Figure 1: Bar chart projects the age group of children admitted for deaddiction treatment.

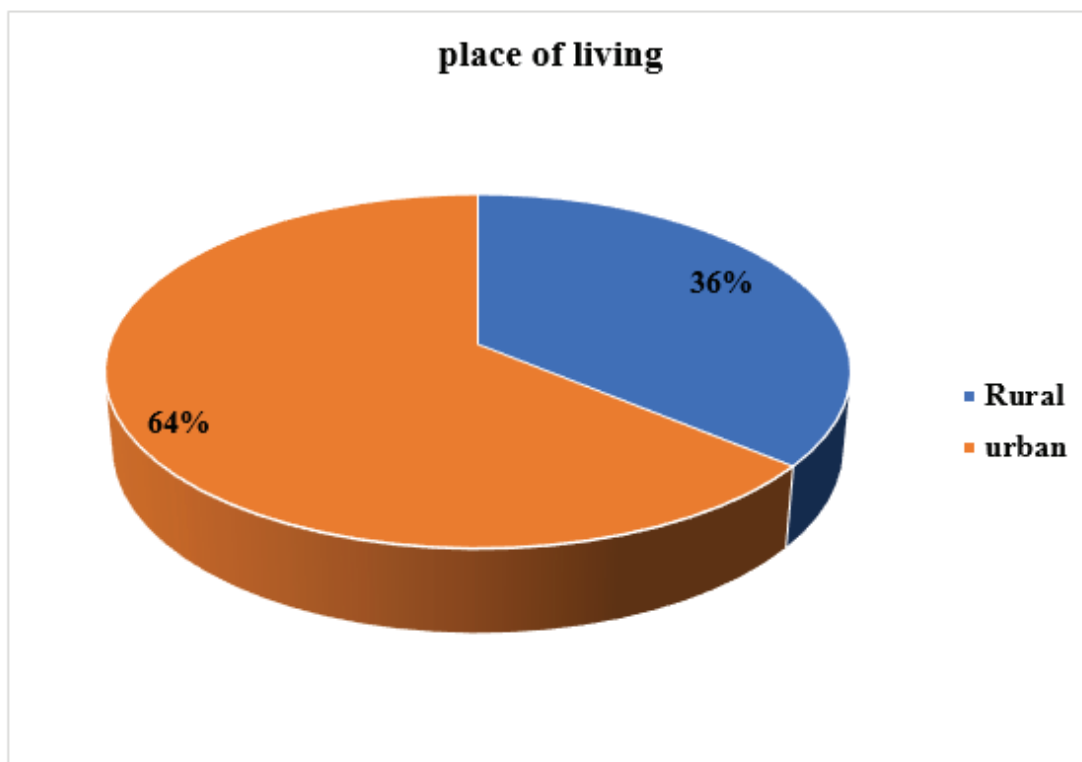


Figure 2: Pie chart illustrates the place of living of the participants

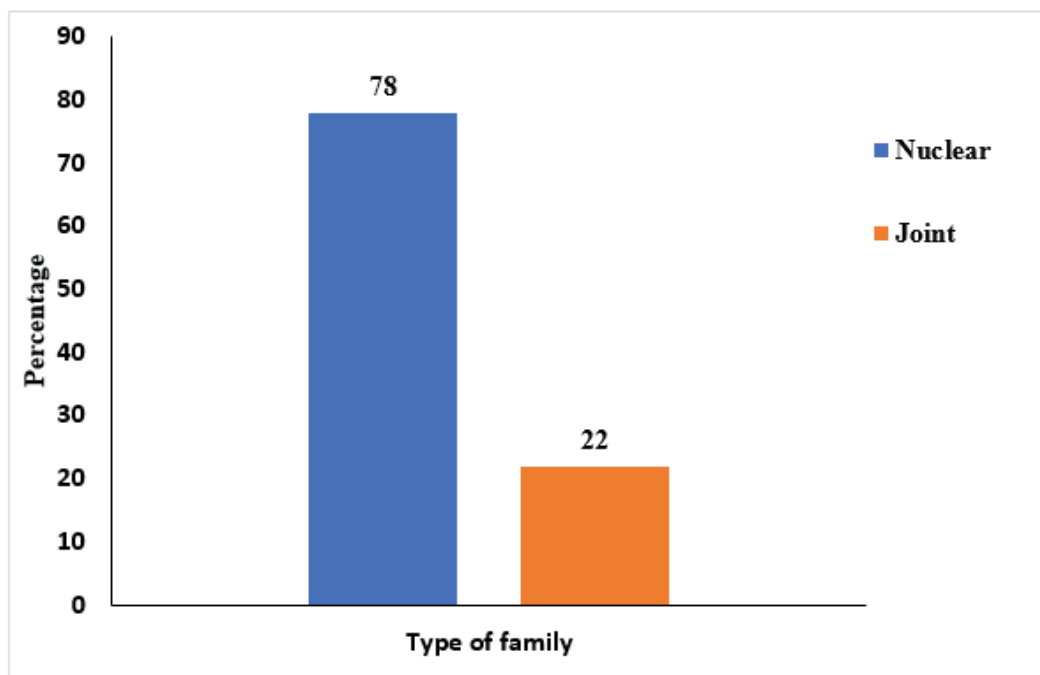


Figure 3: Bar chart exhibits the type of family the participants belong

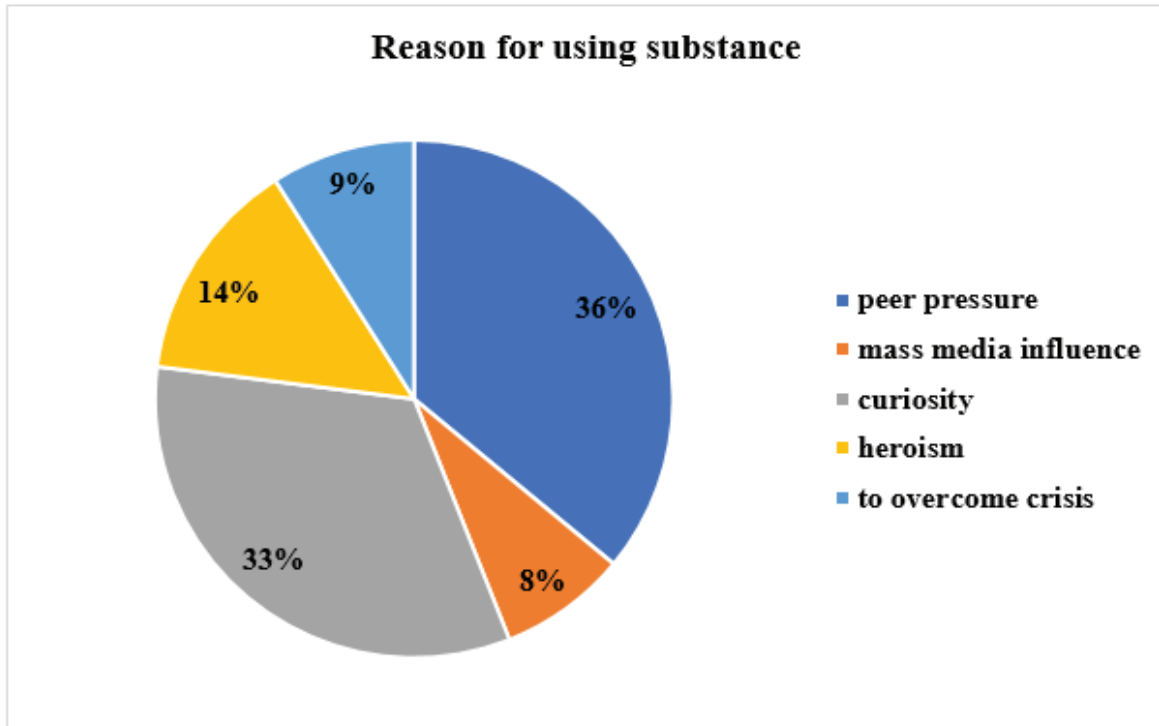


Figure 4: Pie chart shows reason for cannabis abuse.

Discussion

Current study findings show that substance abuse is highest among children hailing from the urban area. Out of 100 subjects, 64 were coming from an urban area. This finding is consistent with the findings of a previous study.²³The findings of the present study were correlated with a study conducted in 2013 in which it was found that peer pressure is an important reason for initiating substance use.²⁴ In the present study, peer pressure is an important reason for drug abuse (36%). Another important aspect is projected by many researchers were the age group of people abusing the substance. It was found that the age group of 15-25 years are at high risk for abusing the substance.^{25,26} This finding also can be correlated with the findings of the present study.

According to another study factors including parental rejection and family conflict, ineffective monitoring and parental discipline strategies, and compromised parental functioning due to substance abuse and mental health problems are among the strongest and most consistent predictors of adolescent problem behaviours such as substance abuse and conduct disorder.^{27,28}The findings

of the present study are consistent with this findings. According to the present study, 92% of the children had a family history of substance abuse. This findings can be correlated with another study.²⁹ Parents especially fathers of 62% of the children were working abroad. The study findings are consistent with another recent study conducted in 2020. According to this study, children who are not living with parents were using cannabis compared to those who live with their parents³⁰.

Conclusion

The researcher identified some important socio-demographic factors among children with cannabis abuse which include nuclear family type, urban life, parents working abroad, staying away from home, peer pressure, and curiosity. It's very important to diagnose and treat cannabis abuse as it may lead to further complications like poly substance use, criminal behaviour, and antisocial activity. The prosperity of a nation lies in the youth. It's important to up bring them in a socially responsible manner. They have to lead a productive life. By the time they realize the adverse effects of drugs, they could end up in other complications and even

suicide. So, it is important to maintain abstinence and improve the outcome of the de addiction treatment. The medical treatment should be supplemented with some interventions which will help to improve the outcome of the treatment.

Ethical Clearance: Ethical clearance was obtained from the ethical committee of Iqraa International Hospital and Research Centre, Kozhikode, Kerala.

Source of Funding: Self

Conflict of Interest: Nil

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