



A Study To Assess Knowledge Regarding Effects Of Substance Abuse On Health Among Adolescent Students At The Selected Senior Secondary School In Anupgarh District With A View To Develop An Informational Booklet

Sanjay Barupal¹, Dr. Pradeep Sharma², Mr. Amar Kumar Verma³

¹Nursing, ²Nursing Lecturer, ³Nursing Lecturer

ABSTRACT

STATEMENT OF THE PROBLEM:

“A study to assess knowledge regarding effects of substance abuse on health among adolescent students at the selected senior secondary school in Anupgarh district with a view to develop an informational booklet.”

OBJECTIVES OF THE STUDY

1. To assess the knowledge regarding effects of substance abuse on health among adolescent students of the selected senior secondary school in Anupgarh district.
2. To find out the significant association of knowledge regarding effects of substance abuse on health with their selected demographic variables.
3. To develop an information booklet regarding effects of substance abuse on health for adolescent students of the selected senior secondary school in Anupgarh district

RESEARCH METHODOLOGY:

A descriptive approach was used for this study. The study was carried out among adolescent students at the selected senior secondary school in Anupgarh district. The research design was descriptive research design. The sample comprised of total 100 adolescent students at the selected senior secondary school were selected by convenience sampling technique.

MAJOR FINDINGS OF THE STUDY:

- The study found a **significant association** between adolescents' knowledge of substance abuse and their **age** ($\chi^2=16.466$) and **educational standard** ($\chi^2=6.9015$) at the 0.05 level of significance, supporting the research hypothesis (H1). However, **no significant association** was found with **gender, family type, area of residence, substance abuse in the family, or family income**, leading to the acceptance of the null hypothesis (H0). This suggests that **age and education level** influence knowledge, while other demographic factors do not. Targeted educational interventions can enhance awareness among adolescents.
- There was significant association between knowledge of adolescents and their socio- demographic variables such as Age ($\chi^2= 16.466$) and educational standard ($\chi^2= 6.9015$), at 0.05 level of significance. Hence the research hypothesis H1 was accepted and null hypothesis H01 was rejected.
- There was no significant association between knowledge of adolescents and their socio- demographic variables such as gender ($\chi^2= 0.1825$), Type of Family ($\chi^2=1.9444$), Area of residence ($\chi^2= 1.444$) Substance abuse in family ($\chi^2= 0.2962$) and family income (monthly) ($\chi^2=7.9524$), at 0.05 level of significance. Hence the research hypothesis H1 was rejected and null hypothesis H01 was accepted.
- The findings highlight that a significant portion of the adolescent population possesses good knowledge about substance abuse. However, gaps remain in certain areas, particularly among specific socio-demographic groups. The association of knowledge levels with variables such as age and educational standard suggests the need for targeted interventions. The study's results affirm the relevance and reliability of the research tool used

CONCLUSION

The following conclusions were drawn on the basis of the findings of the study.

Majority (63%) had good knowledge, 36% had average knowledge, and only 1% had poor knowledge. Significant associations were observed between the level of knowledge and certain socio-demographic variables, such as age and educational standard. Most students were from urban areas, belonged to nuclear families, and had no history of substance abuse in their families. Age and education level significantly influence students' knowledge about substance abuse. Other demographic factors, including gender, family

type, and residence, do not play a significant role. The study suggests focusing on educational interventions to improve awareness among younger students and those in lower grades.

KEY WORDS: Knowledge, Substance abuse, adolescents, Informational booklet.

INTRODUCTION

We don't choose to be addicted; what we choose to do is deny our pain.”

The youth is the hope of the future. " The saying is true to its core when a person retains its humane character in society. Human being is a bio-social entity - a biological organism living in a particular social environment. He comes across various psycho-social problems- causing ill feelings, anxiety, and frustration. In many cases, a person uses drugs to resolve the stresses of life to certain extent. In fact, physical ailments do not exist alone without some accompanying psycho-social ill-feelings nor do psychological problems of stress exist without physiological symptoms. Therefore, pharmacology plays an important role in meeting the physiological as well as psychological disorders.

Substance abuse, also known as drug abuse, is use of a drug in amounts or by methods which are harmful to the individual or others. It is a form of substance-related disorder. Differing definitions of drug abuse are used in public health, medical and criminal justice contexts. In some cases criminal or anti-social behaviour occurs when the person is under the influence of a drug, and long-term personality changes in individuals may occur as well.¹

Substance abuse is a nonadoptive model of drug use, which results in adverse problems and consequences, and includes a set of cognitive, behavioural, and psychological symptoms. As the first experience of substance abuse often starts in adolescence, and studies have shown that drug use is mainly related to cigarette and alcohol consumption, an initial exploration of substance abuse prevalence, including cigarette and alcohol, seems to be the first step in preventing and controlling drug consumption.²

The abuse of drugs leads to change in the structure and function of the brain overtime by repeated drug abuse. The person with drug abuse can impair his self-control and ability to make sound decisions, and at the same time create an intense impulse to take drugs. It is because of these changes in the brain that it is so challenging for a person to stop abusing substance.³

Substance abuse is the use of psychoactive substance that poses significant hazards to health and interferes with social, occupational, psychological, or physical functioning. The commonly used substance is alcohol, tobacco, barbiturates, benzodiazepines, cannabis, cocaine, opioids, and substituted amphetamines. The exact cause of substance abuse is not clear, but it manifests itself as a chronic debilitating disease. Depending on the actual compound, drug abuse including alcohol may lead to health problems, social problems morbidity, injuries, unprotected sex, violence, death, motor vehicle accidents, homicides, suicides, physical dependence or psychological addiction.¹

Globally in 2019, 35 million people are estimated to suffer from drug use disorders and who require treatment services, according to the latest World Drug Report, released today by the United Nations Office on Drugs and Crime (UNODC). Substance use is indirectly and directly responsible for 11.8 million deaths each year.

According to WHO report, world is facing serious health problems related to substance abuse especially in the adolescent comparing to other people, which affects the individuals, family, and society. Individual more susceptible to substance abuse when there is a stressful life situation, the need for social support as well as socioeconomic and cultural difficulties. Alcohol abuse has become one of the major public health concerns worldwide.⁵

The Ministry of Social Justice and Empowerment, Government of India, has published a report titled, "Magnitude of Substance Use in India, 2019." This report is the outcome of research led by the National Drug Dependence Treatment Centre. The key finding of the survey is that there are major variations in different states in the extent and prevalence of use of various substances. Alcohol is the most common substance used followed by cannabis and opioids. The prevalence of alcohol use is 4.6%, with male: female ratio being 17:1, followed by cannabis at 2.8% and opioids at 2.1%. Coming to harmful and dependent use, 19% of alcohol users use it in dependent pattern, whereas 0.25% of cannabis users use it in dependent pattern.⁶

According to an NGO Swami Vivekananda drug de-addicted and treatment centre (VOL 5 NO 3 (2017): MARCH) reported that, 13.1% of the people involved in substance abuse in India are below the age group of 20years. Heroin, cannabis, opium, alcohol and propoxyphene are the five most common drugs are being abused by children in India. A survey shows that of all alcohol 21%, cannabis 3%, and opium 0.1% users are below the age of 18years. Overall 0.4% and 4.6% of total treatment seekers in various states were children.⁷

Many researchers have stated that decreasing academic achievements and academic growth has been correlated with increasing drug use among middle school and secondary students.⁴ Substance abuse has also been shown to negatively impact high school graduate's rates, especially when the predominant use is alcohol with decreased graduation rates negatively impacting future earnings and career opportunities

PROBLEM STATEMENT

"A STUDY TO ASSESS KNOWLEDGE REGARDING EFFECTS OF SUBSTANCE ABUSE ON HEALTH AMONG ADOLESCENT STUDENTS AT THE SELECTED SENIOR SECONDARY SCHOOL IN ANUPGARH DISTRICT WITH A VIEW TO DEVELOP AN INFORMATIONAL BOOKLET."

OBJECTIVES OF THE STUDY

1. To assess the knowledge regarding effects of substance abuse on health among adolescent students of the selected senior secondary school in Anupgarh district.
2. To find out the significant association of knowledge regarding effects of substance abuse on health with their selected demographic variables.
3. To develop an information booklet regarding effects of substance abuse on health for adolescent students of the selected senior secondary school in Anupgarh district

OPERATIONAL DEFINITION

Assess- Assess refers to a method of identification of knowledge regarding effects of substance abuse on health among adolescent students of senior secondary school Anupgarh. questioner methods are the method of the identification of knowledge.

Adolescents: The student under the age group of 15-20 is considered as an adolescent in the present study at the senior secondary school Anupgarh.

Knowledge- knowledge is referred score obtained through structured questionnaire.

Substance abuse: Substance abuse can just be described as the use of drugs or the use of prescription or over-the-counter drugs or alcohol (Alcohol, Opioid, Tobacco, Cocaine.)

Information Booklet: An information booklet refers to a short booklet which include the about the substance abuse, background of the substance abuse, incidence of substance abuse, types hazardous effects on health, prevention of substance abuse, management of substance abuse at home, List of books, websites, and organizations for further information, Stories and Testimonials on substance abuse in Hindi and English.

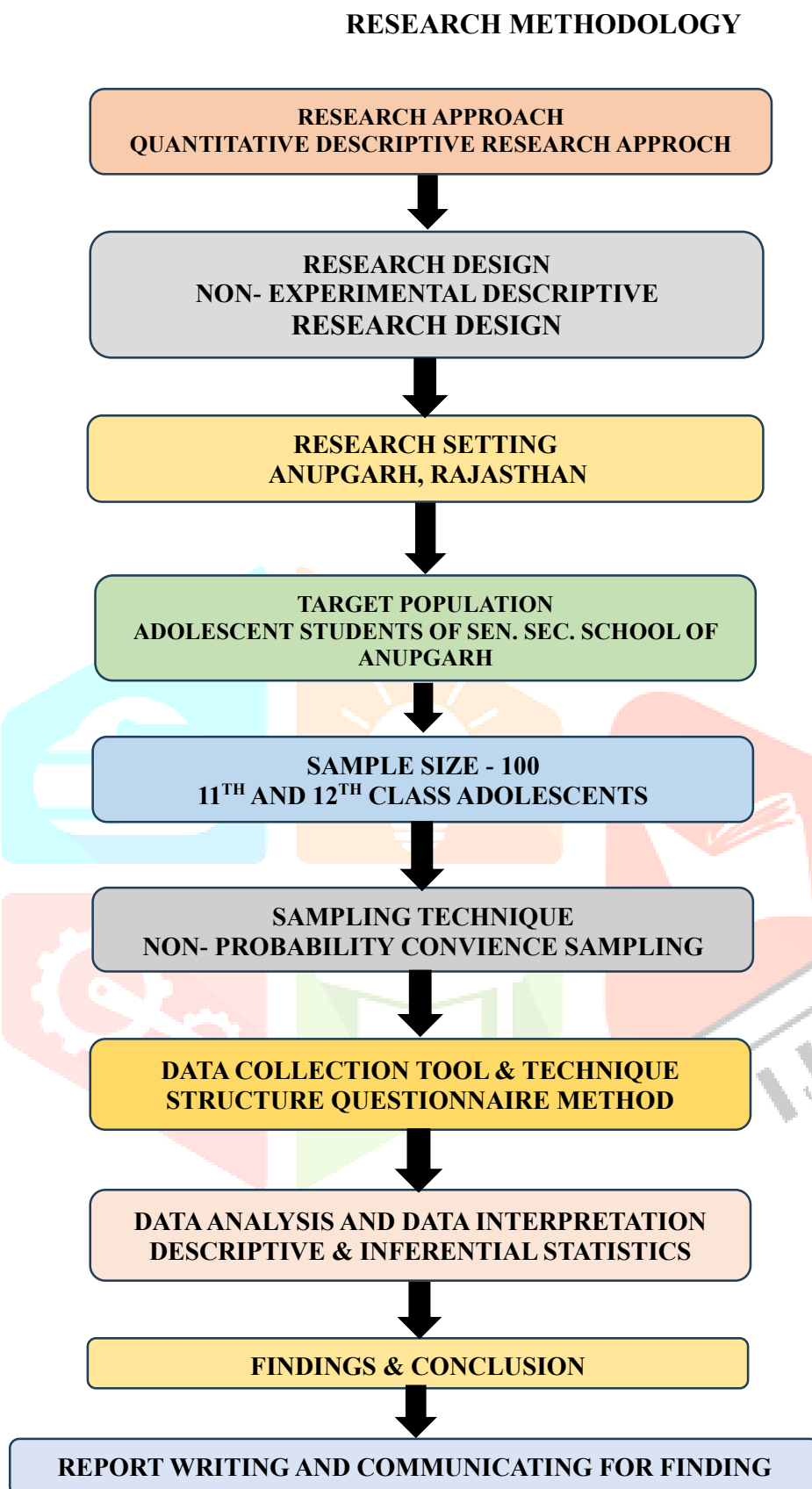


Figure 2: Schematic Representation of Research Methodology

RESULT

SECTION -A	FREQUENCY AND PERCENTAGE DISTRIBUTION OF SOCIO-DEMOGRAPHICAL VARIABLES AMONG ADOLESCENT STUDENTS OF SCHOOL.
SECTION -B	FREQUENCY AND PERCENTAGE DISTRIBUTION OF LEVEL OF KNOWLEDGE REGARDING EFFECTS OF SUBSTANCE ABUSE ON HEALTH AMONG ADOLESCENT STUDENTS OF SCHOOL.
SECTION- C	MEAN, MEAN PERCENTAGE, MEDIAN, MODE, AND STANDARD DEVIATION ACCORDING TO THE LEVEL OF KNOWLEDGE SCORE REGARDING EFFECTS OF SUBSTANCE ABUSE ON HEALTH AMONG ADOLESCENT STUDENTS OF SCHOOL.
SECTION- D	ASSOCIATION OF LEVEL OF KNOWLEDGE REGARDING EFFECTS OF SUBSTANCE ABUSE ON HEALTH AMONG ADOLESCENT STUDENTS OF SCHOOL WITH THEIR SELECTED SOCIO-DEMOGRAPHIC VARIABLES.

SECTION- A

FREQUENCY AND PERCENTAGE DISTRIBUTION OF THE SAMPLES ACCORDING TO THEIR SOCIO- DEMOGRAPHIC VARIABLE

Table No.-2 – frequency and percentage distribution of the samples according to their socio-demographic variables (N-100)

S.N.	DEMOGRAPHIC VARIABLE	CATEGORIES	FREQUENCY	PERCENTAGE
1.	AGE	15-16	58	58.00%
		17-18	37	37.00%
		Above 18	5	5.00%
2.	GENDER	Male	57	57.00%
		Female	43	43.00%
3.	Education standard	11th	70	70.00%
		12th	30	30.00%
4.	Area of residence	Rural	40	40.00%
		Urban	60	60.00%
5.	Substance abuse in family	Yes	4	4.00%
		No	96	96.00%
6.	Type of Family	Nuclear family	60	60.00%
		Joint family	40	40.00%

7.	Family Income (monthly)	Up to 10,000	18	18.00%
		10,001- 30,000	41	41.00%
		More then 30,000	41	41.00%

Shows the demographic characteristics According to their age reveals that majority of the study participants were primarily aged 15-16 years (**58.00%**), with a smaller proportion aged 17-18 years (**37.00%**) and very few above 18 years (**5.00%**).

Regarding distribution of students according to their gender depicted that the Most of the participants were male (57.00%), while Females constituted (43.00%).

In distribution of students according to their education standard Most participants were studying in the 11th grade (70.00%), with only a few in the 12th grade (30.00%).

Regarding distribution of students according to their area of residence reveals that A significant proportion (60.00%) resided in urban areas, with only a small fraction (40.00%) living in rural areas.

In distribution of students according to their family history of substance abuse most participants (96%) reported no substance abuse in their families, while(4.00%) indicated the presence of substance abuse.

With respect to distribution of students according to their family type shows that Most participants belonged to nuclear families (60%), while the remaining (40%) were from joint families.

With respect to distribution of students according to their family income data shows that 41% each of participants belong to (₹10,001 and ₹30,000) middle- and high-income (more than ₹30,000) groups, while only 18% are from low-income families (up to ₹10,000), indicating an economically diverse sample.

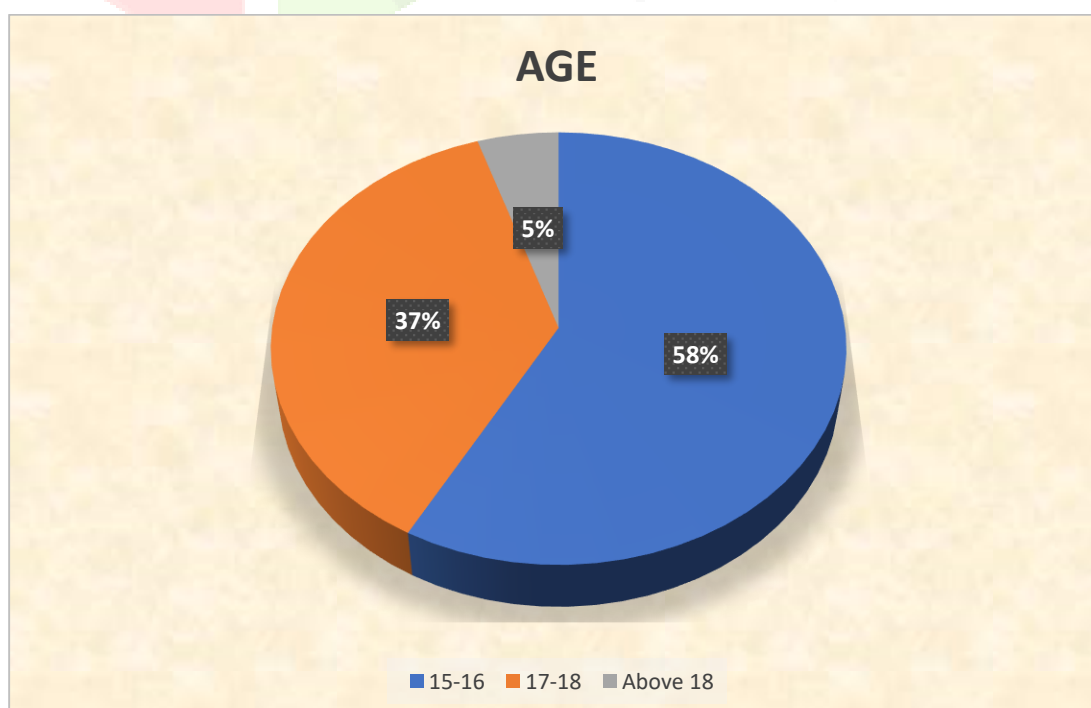


Fig - 3 Distribution of students according to their age group

Figure No.3 pie diagram of **distribution of students according to their age group** According to their age reveals that majority of the study participants were primarily aged 15-16 years (58.00%), with a smaller proportion aged 17-18 years (37.00%) and very few above 18 years (5.00%).

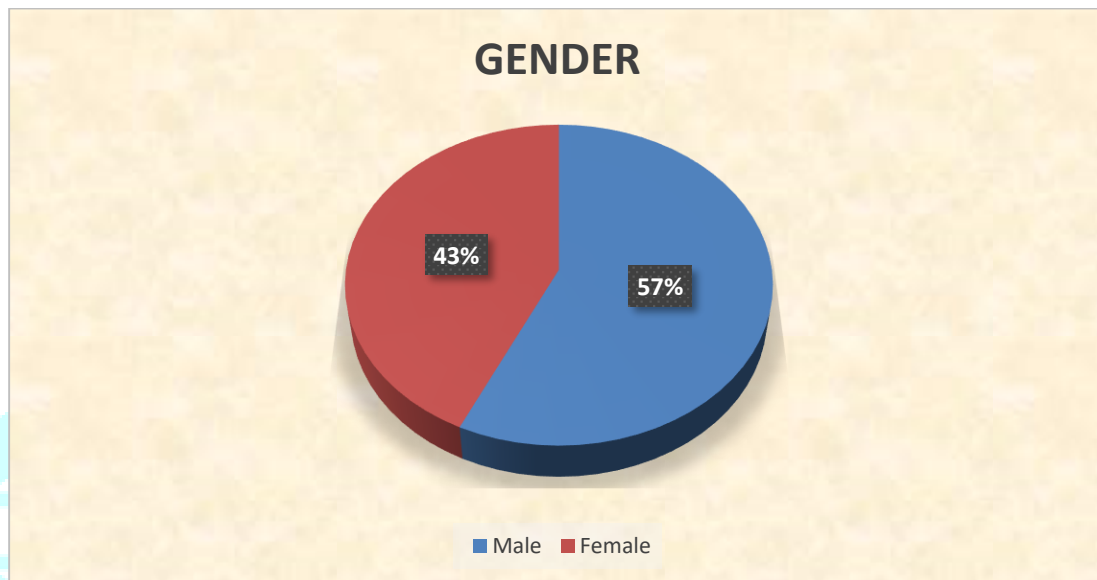
**Fig – 4 Distributions of students according to their gender**

Figure No.4 pie diagram of **distribution of students according to their gender** depicted that the Most of the participants were male (57.00%), while Females constituted (43.00%).

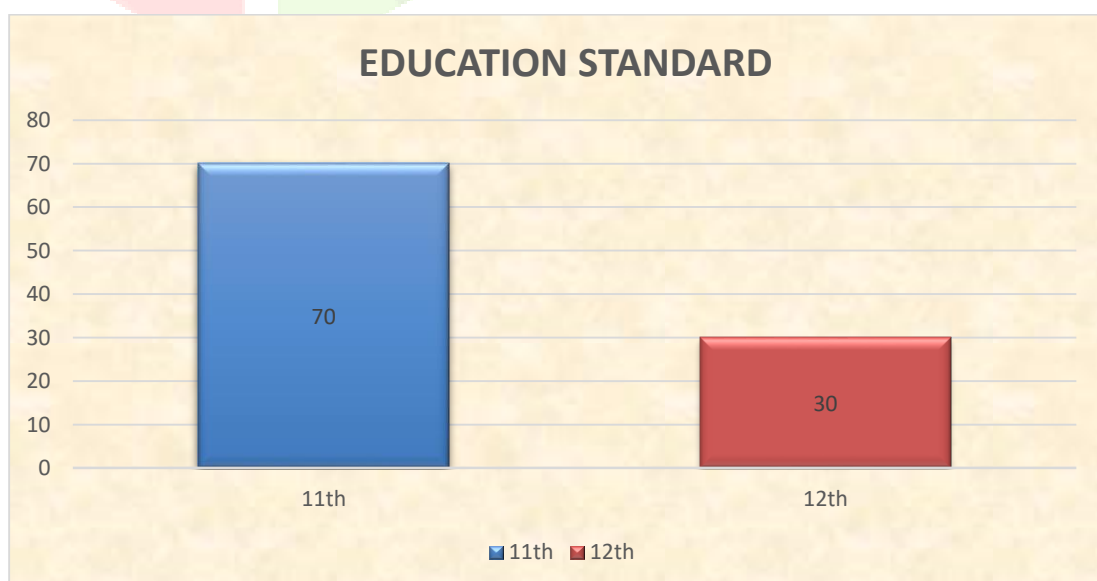
**Fig – 5 Distributions of students according to their education standard**

Figure no.5 column diagram of distribution of students according to their education standard Most

participants were studying in the 11th grade (70.00%), with only a few in the 12th grade (30.00%).

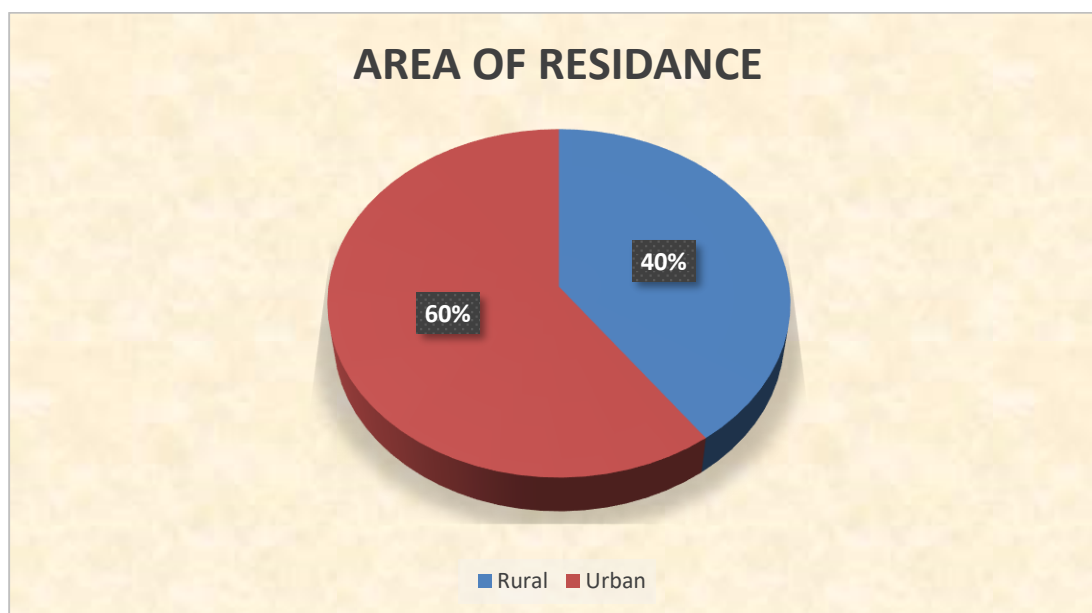


Fig – 6 Distributions of students according to their area of residence

Figure no.6 pie diagram of **distribution of students according to their area of residence** reveals that A significant proportion (60.00%) resided in urban areas, with only a small fraction (40.00%) living in rural areas.

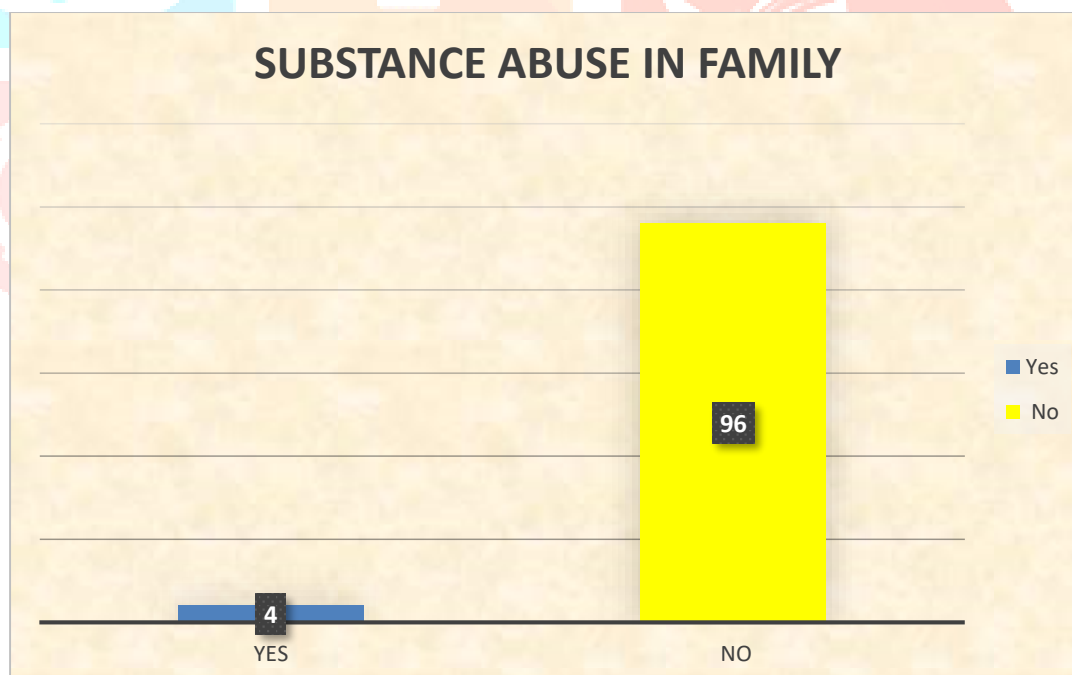


Fig – 7 Distributions of students according to their family history of substance abuse

Figure no.7 column diagram of **distribution of students according to their family history of substance abuse** most participants (96%) reported no substance abuse in their families, while (4.00%) indicated the presence of substance abuse.

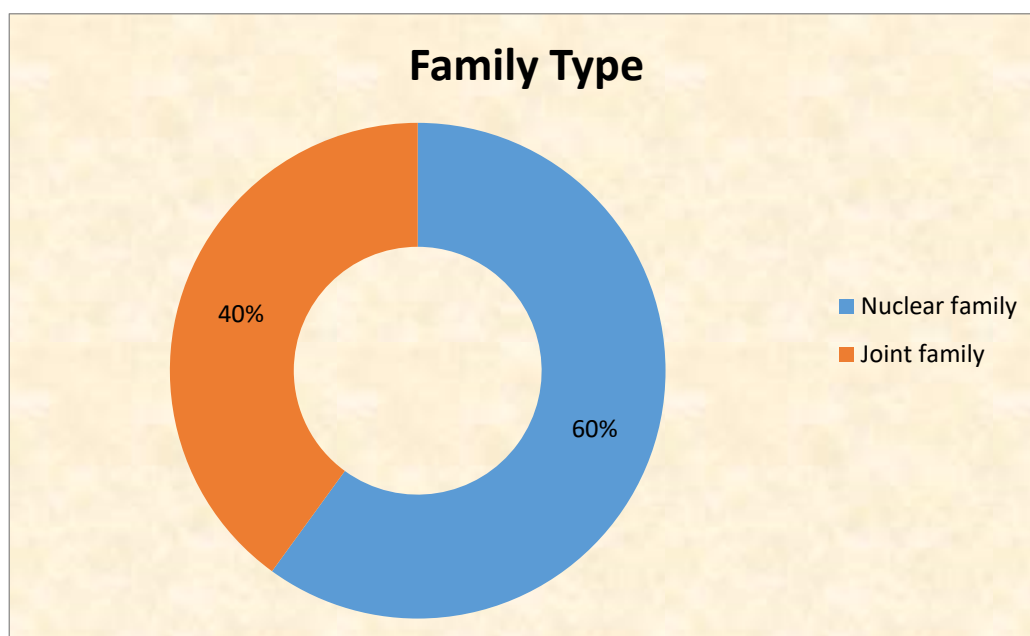


Fig – 8 Distributions of students according to their family type

Figure no.8 pie diagram **distribution of students according to their family type** shows that Most participants belonged to nuclear families (60%), while the remaining (40%) were from joint families.

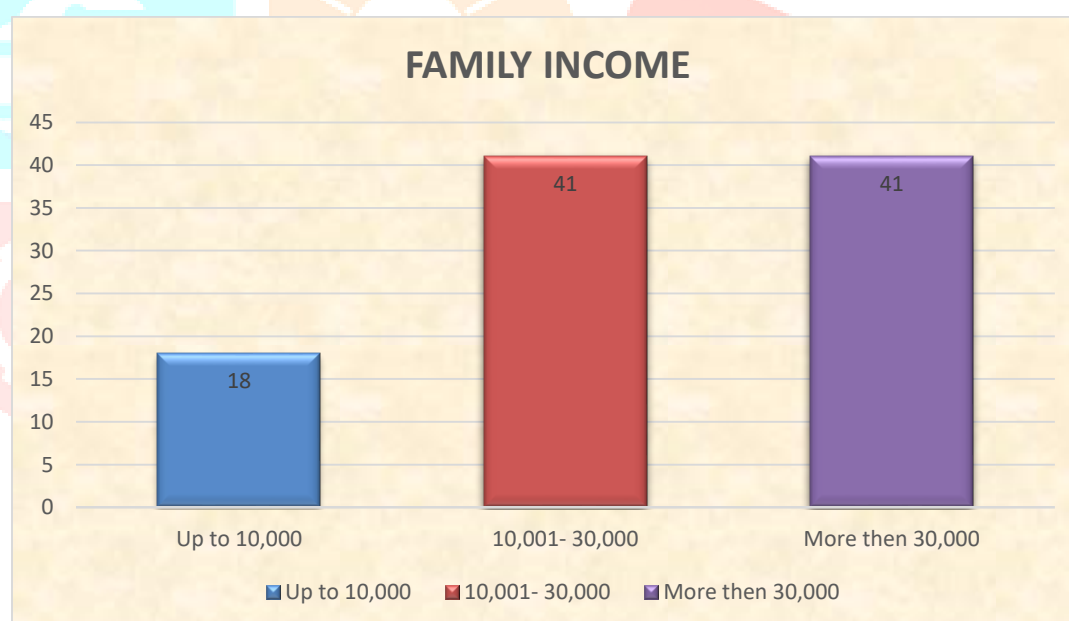


Fig – 9 Distributions of students according to their family income

Figure no.9 column diagram of **distribution of students according to their family income** data shows that 41% each of participants belong to (₹10,001 and ₹30,000) middle- and high-income (more than ₹30,000) groups, while only 18% are from low-income families (up to ₹10,000), indicating an economically diverse sample

SECTION -B

FREQUENCY AND PERCENTAGE DISTRIBUTION ACCORDING TO THE KNOWLEDGE REGARDING EFFECTS OF SUBSTANCE ABUSE ON HEALTH AMONG ADOLESCENT STUDENTS AT THE SELECTED SENIOR SECONDARY SCHOOL IN ANUPGARH DISTRICT.

Table no. 3 - frequency and percentage distribution according to the knowledge regarding effects of substance abuse on health among adolescent students

N=100

LEVEL OF KNOWLEDGE	SCORE	FREQUENCY(f)	PERCENTAGE (%)
GOOD	21-30	63	63.00%
AVERAGE	10-20	36	36.00%
POOR	1-09	1	1.00%

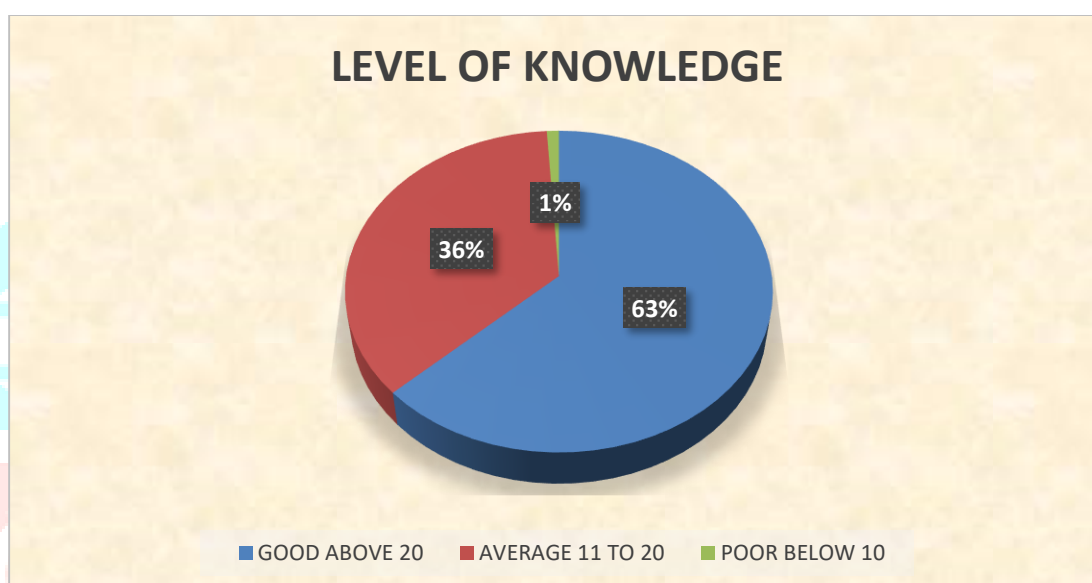


Fig 10- Distribution of students according to their level of knowledge

Figure no.10 pie diagram of **distribution of students according to their level of knowledge** that represents the frequency and percentage distribution of level of knowledge regarding effects of substance abuse on health among adolescent students, 63% (63) students have good knowledge, 36% (36) have average knowledge and 1% (1) have poor knowledge regarding effects of substance abuse on health.

SECTION C

Mean, Mean Percentage, Median, Mode, and standard deviation according to the level of knowledge score regarding effects of substance abuse on health among adolescent students at the selected senior secondary school.

Table no. 4 - Mean, Mean Percentage, Median, Mode, and standard deviation according to the level of knowledge score regarding effects of substance abuse on health among adolescent students at the selected senior secondary school

N=100

level of knowledge score regarding effects of substance abuse on health among adolescent students	
N	100
Mean	21.25
Mean%	46.53
Median	22
Std. Deviation	3.33
Mode	24
Maximum score	30

The table No.- 4 presents the statistical analysis of the knowledge scores regarding the effects of substance abuse on health among adolescent students at a selected senior secondary school. The key statistical measures included are Mean, Mean Percentage, Median, Mode, and Standard Deviation (SD).

- The mean knowledge score of the students is 21.25, indicating the average level of knowledge among the participants.
- The mean percentage is 46.53%, suggesting that, on average, students scored below 50% of the total possible marks, reflecting a moderate to low level of knowledge on the topic.
- The median score is 22, showing that half of the students scored below this value and half scored above, making it a central tendency measure.
- The mode score is 24, representing the most frequently occurring score among the students.
- The standard deviation (SD) is 3.33, which signifies the variability or dispersion of the knowledge scores. A lower SD value indicates that most students' scores are close to the mean, suggesting less

variation in their knowledge levels.

Overall, these findings suggest that while students have some awareness of the effects of substance abuse on health, their knowledge levels are not very high and show limited variation.

SECTION-D

ASSOCIATION OF LEVEL OF KNOWLEDGE REGARDING EFFECTS OF SUBSTANCE ABUSE ON HEALTH AMONG ADOLESCENT STUDENTS OF SCHOOL WITH THEIR SELECTED DEMOGRAPHICAL VARIABLES.

Chi square test was done to find out the association between awareness score of women in reproductive age group with their selected demographic variables

This section deals with the analysis and interpretation of the data collected to find out the association between knowledge score with their selected socio-demographic variables such as age, gender, educational standard, area of residence, substance abuse in family, type of family, family income.

A non-parametric chi-square is used to describe the association between knowledge scores with their selected socio-demographic variables.

to find out the association between knowledge regarding effects of substance abuse on health among adolescent students at the selected senior secondary school in Anupgarh district and their selected socio-demographic variables.

In order to find out the association between the knowledge score among school students and selected socio-demographical variables, the following hypotheses have been formulated:

Table No. 5 - Association of level of knowledge regarding effects of substance abuse on health among adolescent students of school with their selected demographical variables.

N=100

S.N O	Demographi cal variables	categori es	Frequen cy	level of knowledge			Chi squa re	d f	Tabulat ed value	LOS@0. 05
				GOO D	AVARA GE	POO R				
1.	AGE	15-16	58	15	36	7	16.46	4	9.48	S

		17-18	37	7	14	16	6			
		ABOVE 18	5	3	2	0				
2.	GENDER	MALE	57	24	19	14	0.1825	2	5.99	NS
		FEMALE	43	19	15	9				
3.	Education standard	11 th pass	70	41	16	13	6.9015	2	5.99	S
		12 th pass	30	9	11	10				
4.	Type of Family	Nuclear family	60	32	17	11	1.9444	2	5.99	NS
		Joint family	40	16	13	11				
5.	Area of residence	RURAL	40	14	18	8	1.4444	2	5.99	NS
		URBAN	60	21	32	7				
6.	Substance abuse in family	YES	4	2	1	1	0.2962	2	5.99	NS
		NO	96	56	29	15				
7.	FAMILY INCOME (MONTHLY)	Up to 10,000	18	11	6	1	7.9524	4	9.48	NS
		10,001-30,000	41	18	9	14				
		More than 30,000	41	22	13	6				

S- SIGNIFICANT

NS- NON- SIGNIFICANT

INTERPETATION

SIGNIFICANCE:- The calculated value of chi square with respect to age and education standard is more than the tabulated value hence researcher reject the null hypothesis and accept the research hypothesis, it means there is influence / impact of age and education standard on knowledge regarding effect of substance abuse on health among adolescent students of the selected senior secondary school in Anupgarh district, Rajasthan.

NON-SIGNIFICANCE:-The calculated value is lesser than tabulated value, so the researcher fails to reject the null hypothesis so there is no impact/ influence of gender, type of family, area of residence, substance abuse in family, family income (monthly) on knowledge regarding effect of substance abuse on health among adolescent students of the selected senior secondary school in Anupgarh district, Rajasthan.

SUMMARY

This chapter deals with the analysis and interpretation of the findings of data collected from 100 Students of Swami Vivekanand Govt. Model School Anupgarh, Rajasthan to test the reliability of the tool and the feasibility of the main study. Descriptive and inferential statistics were used for analysis. Findings revealed that the tool is relevant and majority of Students of senior secondary school had good knowledge regarding effects of substance abuse. The chi-square result showed a significant association between the level of knowledge among Students of senior secondary school Anupgarh Rajasthan and selected demographic variables of Substance abuse in family.

The study aimed to assess the knowledge regarding the effects of substance abuse on health among adolescent students in a senior secondary school in Anupgarh District. Data from 100 students were analyzed using descriptive and inferential statistics. The findings indicated:

- Majority (63%) had good knowledge, 36% had average knowledge, and only 1% had poor knowledge.
- Significant associations were observed between the level of knowledge and certain socio-demographic variables, such as age and educational standard.
- Most students were from urban areas, belonged to nuclear families, and had no history of substance abuse in their families.

An informational booklet was developed to enhance awareness about the health impacts of substance abuse.

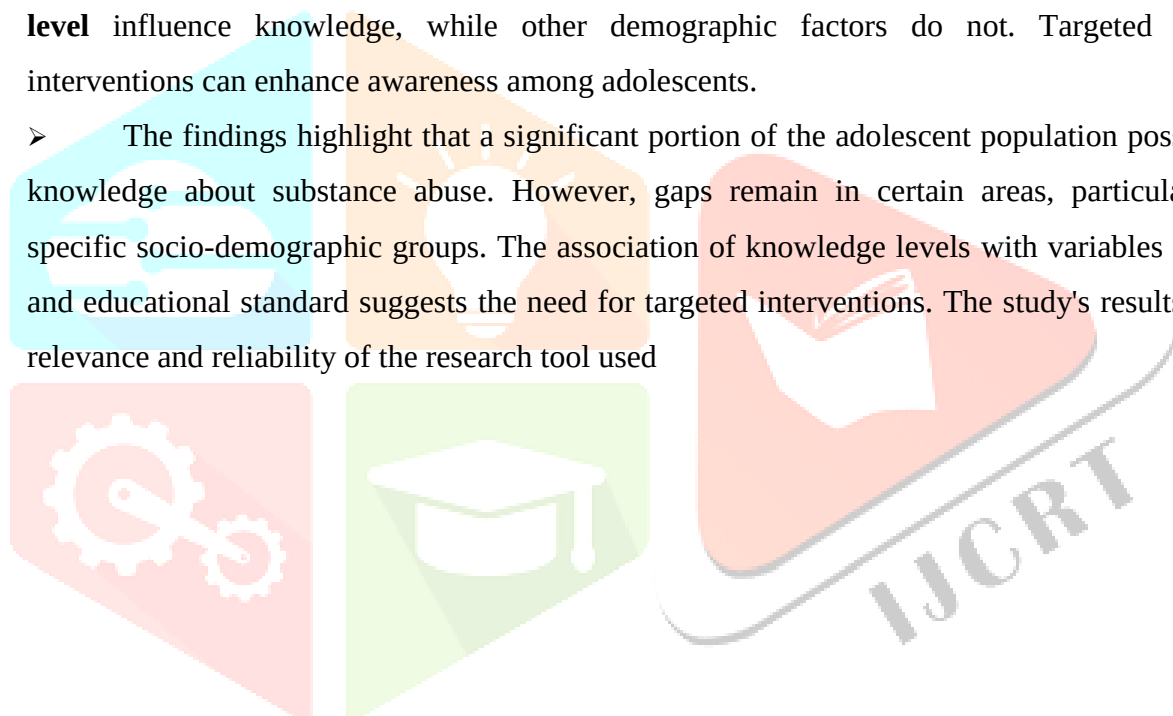
CONCLUSION

The present study was undertaken “A study to assess the knowledge regarding effects of substance abuse on health among adolescent students at the selected senior secondary school in Anupgarh district with a view to develop an informational booklet.”

The following conclusions were drawn on the basis of the findings of the study.

- Majority (63%) had good knowledge, 36% had average knowledge, and only 1% had poor knowledge.

- Significant associations were observed between the level of knowledge and certain socio-demographic variables, such as age and educational standard.
- Other demographic factors, including gender, family type, and residence, do not play a significant role.
- The study suggests focusing on educational interventions to improve awareness among younger students and those in lower grades.
 - The study found a **significant association** between adolescents' knowledge of substance abuse and their **age** ($\chi^2=16.466$) and **educational standard** ($\chi^2=6.9015$) at the 0.05 level of significance, supporting the research hypothesis (H1). However, **no significant association** was found with **gender, family type, area of residence, substance abuse in the family, or family income**, leading to the acceptance of the null hypothesis (H0). This suggests that **age and education level** influence knowledge, while other demographic factors do not. Targeted educational interventions can enhance awareness among adolescents.
 - The findings highlight that a significant portion of the adolescent population possesses good knowledge about substance abuse. However, gaps remain in certain areas, particularly among specific socio-demographic groups. The association of knowledge levels with variables such as age and educational standard suggests the need for targeted interventions. The study's results affirm the relevance and reliability of the research tool used



BIBLIOGRAPHY

1. Jonas AP, Sickles RT, Lombardo JA. Substance abuse. Clin Sports Med. 1992;11(2):379–401.
2. Nahvizada MM, Akhavan S, Arti S, Qaraat L, Geramian N, Farajzadegan Z, et al. A review study of substance abuse status in high school students, Isfahan, Iran. Int J Prev Med. 2014;5(Suppl 2):S77–82.
3. Volkow ND. How science has revolutionized the understanding of drug addiction. J Drug Addict Educ Errad [Internet]. 2018;7(3):1–32. Available from:

<https://www.drugabuse.gov/publications/drugs-brains-behavior-science-addiction/drugs-brain>

4. United Nations Office on Drugs and Crime. World Drug Report 2019: 35 million people worldwide suffer from drug use disorders while only 1 in 7 people receive treatment. United Nations Inf Serv [Internet]. 2019;1–2. Available from:

https://www.unodc.org/unodc/en/press/releases/2019/June/world-drug-report-2019_-35-million-people-worldwide-suffer-from-drug-use-disorders-while-only-1-in-7-people-receive-treatment.html
<https://www.unodc.org/unodc/en/frontpage/2019/June/world-drug-repo>

5. Melling P. Adolescent mental health. Aust Fam Physician. 2005;34(4):1–5.

6. Kandeger A, Guler HA, Egilmez U, Guler O. Major depressive disorder comorbid severe hydrocephalus caused by Arnold – Chiari malformation Does exposure to a seclusion and restraint event during clerkship influence medical student ' s attitudes toward psychiatry ? Indian J Psychiatry. 2018;59(4):2017–8.

7. Singh M, Bala N, Garg PD, Bansal S, Bumrah S, Attri A. Substance abuse in Children and adolescent: A Retrospective Study. International Journal of Medical Research and Review [Internet]. 2017 Mar 31 [cited 2024 May 23];5(3):352–6. Available from:
<https://ijmrr.medresearch.in/index.php/ijmrr/article/view/846>

8. Crocq MA. Historical and cultural aspects of man's relationship with addictive drugs. Dialogues Clin Neurosci. 2007;9(4):355–61.

9. World Health Organization. Alcohol. In: Who [Internet]. 2019. p. 1–5. Available from: [Www.who.int/news-room/fact-sheets/detail/alcohol](http://www.who.int/news-room/fact-sheets/detail/alcohol)

10. World Health Organization. Global Health Risks. In: Global Health Risks [Internet]. 2009. Available from:
http://www.who.int/healthinfo/global_burden_disease/GlobalHealthRisks_report_full.pdf

11. Baba T, Ganai A, Qadri S, Margoob M, iqbal qazi, khan zahid. An epidemiological study on substance abuse among college students of north India (Kashmir valley). Int J Med Sci Public Heal. 2013;2(3):562.

12. Mishra PN. Substance abuse rising amongst Indian kids. DNA Publication [Internet]. 214AD; Available from: <https://www.dnaindia.com/india/report-substance-abuse-rising-amongst-indian-kids-2027658>

13. Dhawan A, Pattanayak RD, Chopra A, Mulye TP, Park MJ, Nelson CD, et al. Assessment of pattern, profile and correlates of substance use among children in India. J Adolesc Heal [Internet]. 2013;45(1):8–24. Available from: [http://dx.doi.org/10.1016/S0140-6736\(12\)60606-0](http://dx.doi.org/10.1016/S0140-6736(12)60606-0)
<http://dx.doi.org/10.1016/j.paid.2010.05.029>
<http://dx.doi.org/10.1016/j.jadohealth.2009.03>

013

14. Dobhal P, Kashyap A, Dobhal A, Mattas S. Substance abuse – An emerging problem among school-going adolescents of Jaipur, Rajasthan. Asian Journal of Medical Sciences. 2022 Sep 1;13:156–63.

15. NISD [Internet]. [cited 2024 May 20]. Available from: https://www.nisd.gov.in/drug_abuse_prevention.html NISD [Internet]. [cited 2024 May 20]. Available from: https://www.nisd.gov.in/drug_abuse_prevention.html

16. Nayak D. REVIEW OF LITERATURE:
https://shodhgangotri.inflibnet.ac.in/bitstream/20.500.14146/6156/3/03_review%20of%20literature.pdf

