MODULE 14: PROTECTION FROM SUBSTANCE/DRUG ABUSE

Introduction:

After discussing the causes, consequences and myths and misconceptions, it is important to understand the protective factors as well to be aware of the support structures that can be accessed both for prevention and treatment, if needed. The knowledge about various laws would help us deal with problems related to drug abuse.

Overall Learning Objectives:

Learners will be able to:
• Identify and access the safety net for support to stay away/give up substance abuse; and
• Know about the prevailing laws of substance abuse.

Activity 1: Safety Net

Learning objective:
• Learners will be able to understand the importance of creating and accessing a safety net

Time required: 30 minutes

Material required: Fact Sheets, Writing Board, Marker/Chalk

Notes for the facilitator:

• Begin the session by introducing the term “SAFETY NET” and invite learners to share their knowledge.
• Note down all the responses on board and then explain the term using this definition: “Safety net can be understood as a support system formed by trusted individuals and relevant organizations that prevent access to drugs and other harmful and addictive substances and further encourage access to treatment and rehabilitation services if an individual is in need of them.”
• Distribute the worksheet (provided overleaf) and instruct learners to write the following things in the space provided on the worksheet.
  o Who all would you include in your safety net?
  o Why have you included these people/ institutions in your safety net?
• Give 5 minutes to all the students to complete their worksheet.
• Ask some volunteers to share their sheet with everyone.
• Have a discussion on what is the advantage of having this safety net.
• Emphasize on the importance of staying away from drug/substance abuse in a few sentences and tell the learners that empowered with appropriate information and skills, and supported by a positive environment that the safety net represents, they should be able to resist the temptation to experiment with drugs.
• Reiterate that each person should be aware about who all constitute his/her safety net and think of ways by which he/she can open a communication channel for information and advice, support or even share a confidential feeling/incident.
• Permit interjections in between and sum up in the end.

**Summing Up:**

• It is possible to stay away from drugs if an individual has appropriate information, skills and the will to say ‘no’ to the temptation to experiment with drugs
• If the pressure or temptation to abuse drugs is very high, an individual should seek help from his/her ‘safety net’
• This safety net could include parents, teachers, elders, relatives, peers, counselors and guides, health professionals or even government including police dealing with narcotics or non-government organizations
• If an individual faces pressure to experiment, s/he should not feel isolated and should be empowered to access members in the safety net and seek information, advice, support through appropriate communication channels
• Although prevention is the best, there is hope even if someone gets addicted. If one has a sincere intention to give up substance/ drug abuse, everyone around this person has a responsibility to support the individual. As drug dependence is physical as well as psychological, seeking early professional help is advisable

*Note: This safety net can also help an individual in dealing with other challenging situations (for example, abuse, discrimination, bullying etc) effectively.*

*Please refer to Activity 6: ‘Communicating Effectively’ to reinforce assertive style of communication as an important skill that an individual should have for positive and responsible living.*
WORKSHEET

SAFETY NET

Please remember to provide feedback at the end of this module
Activity 2: Laws Pertaining to Drug Use/Abuse

Learning objective:

To enable learners to:
• Become aware of different laws related to substance abuse

Time required: 30 minutes

Material required: Fact Sheet, Writing Board, Marker/Chalk

Notes for the facilitator:
• Initiate the session by asking learners if they know any law pertaining to prevention of substance abuse. For example, tobacco products cannot be sold to persons who are below 18 years of age.
• Make a power-point presentation related to different laws one by one and elicit responses/reaction of learners about each law one by one. Fact Sheet at the end of this module may be used for preparing the presentation.
• Note down the major points emerging out of the discussion in the session and end the session by summing up the following points.

Summing Up:
• The laws are needed to protect people from the menace of drug/substance abuse.
• The awareness about different laws is necessary to protect oneself and others.

Activity 3: De-addiction, Care and Support

Learning objectives:

To enable learners to:
• Recognize that treatment and rehabilitation is possible if one gets addicted
• Support any individual who is into substance abuse to give up the habit rather than stigmatize him/her

Time required: 45 minutes

Materials required: Fact Sheets, Writing Board Marker/Chalk
Notes for the facilitator:

- Divide the learners into small groups (each group consisting of not more than 5-6 learners) and identify one learner as reporter in each group. The four case studies are to be discussed and the answers to questions related to each case study are to be finalized in groups.
- Ask the group reporter to note down answers finalized by the group. The time devoted may not be more than 10-15 minutes. Since the number of groups will be more, one case study may be assigned to more than one group.
- After the group work is over, ask each group reporter to present the answers that may be followed by brief discussion.
- Note down the main points emerged during presentations by each group and discussions.
- Summarize the entire session by adding those points that might have been missed out in group presentations and ensuing discussions.

Case Study 1

Montoo, a student of class XII was a wonderful son, a brilliant student and a responsible member of their family till he started taking drugs. His parents are extremely worried as they feel that their son may have no future. Montoo’s teachers are sympathetic towards him but do not know how to help him. When Montoo is not under the influence of drugs, he also strongly feels that he should give up on drugs but he is dependent on these drugs and despite good intentions, he is not able to give up on this habit that may ruin his career and life.

Questions:
1. Do you think Montoo is addicted to the drugs he takes and is dependent on them? If yes, why do you think so?
2. What can Montoo’s parents do to bring him out of this condition?
3. What role can his teachers play to help him?
4. What steps may be taken to support and rehabilitate Montoo after he comes out of the De-Addiction Centre?
Case Study 2

Junaid, a young lecturer in a Degree College, is passing through a difficult phase. He started drinking a few years ago when he was under great emotional stress. Over a period of time, he has become dependent on alcohol. But now apart from having serious health problems, drinking is affecting his image as a lecturer. He once took the decision to quit drinking, but two days later felt acute uneasiness and mild tremors. Afraid that his condition could worsen without drinking alcohol, he got back to drinking.

Questions:
1. Do you think drinking helped Junaid in dealing with his emotional stress effectively? Please give reasons for your response.
2. Why could Junaid not quit drinking although he wanted to?
3. Do you think Junaid can never quit drinking? Please give reasons for your response.
4. What should be done to enable Junaid to quit drinking?

Case Study 3

Radhakrishnan, student of class IX has been a good student. But over the past 6 months, his teacher notices that he is inattentive during classes and his grades are falling. The teacher was concerned and spoke to Radhakrishnan if something as bothering him. The boy shared that recently his father has started drinking a lot, comes home late and that fights between his parents have increased. He also disclosed that his father has lost his job and has huge debts to repay.

Questions:
1. Do you think Radhakrishnan’s teacher was genuinely concerned about his/her student’s well-being? Please provide reasons for your response.
2. Do you think that Radhakrishnan did the right thing by sharing his personal problem with his teacher?
3. Can the teacher possibly help Radhakrishnan? If yes, how?
4. What are the problems that Radhakrishnan’s father is facing? Is he handling them well? Please give reasons for your response.
Case Study 4

John, an 18 year old boy is frequently seen loitering around in the colony where he stays. On being asked by his neighbor about his problem he stated that he was in the habit of taking drugs because of which he has been unable to concentrate on his studies and had dropped out of school. He feels as if it is the end of his life and is incapable of doing anything meaningful. His parents who live in the village have also left him to be on his own. Now he doesn’t know what to do. He is mentally frail and feels hopeless.

Questions:
1. Who do you think is responsible for John’s situation?
2. What are the options available to John?
3. How can John be helped?

Summing up:

- Drug abuse leads to drug addiction with the development of tolerance and dependence. Tolerance refers to a condition where the user needs increasing amount of the drug to experience the same effect. Smaller quantity that was sufficient earlier becomes ineffective, hence the user is forced to increase the amount of drug intake at regular intervals. This is referred to as the state of dependence. Drug abuse leads to physical and psychological dependence. Some drugs produce only physical dependence while others produce both physical and psychological dependence.
- Parents and teachers play decisive roles in helping children cultivate proper attitude towards drugs and remain away from drug abuse.
- Parents and teachers have the most important influence on their children. In spite of the fact that children today are exposed to various factors, parents continue to be role models for majority of them.
- In case, an individual becomes addicted, it is possible to come out of this habit provided the person has a sincere desire to stop taking drugs, is referred to professional help and is supported by family, friends and schools.
- Nobody is to blame for problems related to drug abuse but everyone is responsible in contributing towards resolving the problem.
- A person who becomes an addict should receive a lot of care and support from family, friends, and society. S/he should not be labeled or stigmatized.
FACT SHEET

The protective factors are categorized within the individual, family and the environment that enhance one’s ability to resist drug abuse. Protective factors include:

- Well developed personal skills to deal with difficult situations such as ability to analyze situations, take quick decisions, to communicate and negotiate
- Positive self-esteem, self-concept, academic achievements
- Good personal relationship with people including family members and friends.
- Growing up in a nurturing home with open communication with parents and positive parental support.
- Adequate resources to meet one’s physical and emotional needs
- Cultural norms that discourages Substance/Drug Abuse.
- Well enforced laws that regulate Substance/Drug Abuse.

Drugs and the Law:

Drug Abuse is a major public health problem with extensive legal ramifications:

**Laws pertaining to Tobacco and Smoking include:**

- Cigarettes and other tobacco products (Prohibition of advertisement and regulation of trade and commerce, production, supply and distribution) Act, 2003. It came into effect on 18 May 2003 and extends to the whole of India.
- Prohibition of smoking in public places: The Supreme Court of India has approved ban on smoking in public places from 2 October 2008. Smoking is strictly prohibited in any place where public have access. Such places include auditoriums, hospital buildings, health institutions, amusement centres, restaurants, court building, public conveyances, libraries, education institutions etc. Any person found smoking in a public place would be liable to be fined up to an amount of Rs.200.
- Prohibition of advertisement of cigarette or other tobacco products. Direct/indirect advertisement in print, electronic or outdoor media are strictly prohibited. Sponsorship and promotion of cigarettes and other tobacco products are also banned. Persons involved in such actions will be punishable with 2 years imprisonment or/and fine up to Rs.1000. In the case of second or subsequent conviction, imprisonment will be for a term of 5 years and with a fine of up to Rs. 5000.
- Sale of cigarettes and other tobacco products to a person below the age of 18 years is not allowed. Tobacco products include cigarettes, cigars, cheroots, *beedis*, cigarette tobacco, snuff, *gutka*, toothpowder containing tobacco, *pan masala*, any chewing material having tobacco as one of its ingredients). Sale of cigarettes within 100 meters of a school is also banned.
Laws pertaining to Alcohol include:

- Licensing Laws regulating retail supply
- Legislation on drunkenness, defining intoxication as an offence under certain circumstances
- Road traffic legislation – makes drunken drinking an offence when blood alcohol level exceeds a certain value (30 mg/100 ml of blood) detected by breath analyzer.
- Minimum age of drinking varies in different states

Narcotic Drugs and Psychotropic Substance Act 1985 – NDPS Act 1985
Cultivation, production, manufacturing possession, sale purchase, transportation and warehousing, consumption, and interstate movement, transshipment of narcotic and psychotropic drugs is prohibited without the permission and regulation of state or central government.

Breaking of the law is punishable by imprisonment and fine.

Treatment for Drug/Substance Abuse:

Drug Abuse and dependence can be treated by adopting a combination of approaches which include medication, behavioral changes and health care for physical and psychological symptoms. Professional Counseling or Drug De-addiction Therapy is required to help patients overcome addiction. This treatment needs to be administered for an appropriate period of time as per the needs of the person and also in accordance with the severity of the problem.

Phases of Treatment

Early/brief interventions:

Early/brief interventions are designed to prevent the progression to problematic drug use by detecting persons who are using drugs in a potentially hazardous manner and helping them to stop or decrease use.

Outreach, harm reduction and low-threshold interventions:

Outreach, harm reduction and low-threshold interventions aim to reach drug users, build trust, provide basic living support, prevent or reduce negative health consequences associated with certain behaviours, and initiate a therapeutic process whenever the person is ready for it, without setting abstinence as an initial condition.

Detoxification:

"Detoxification" or 'detox' refers to the period of time it takes for the 'active' toxins to leave the body -- as little as a week or as long as several months. Appropriate medications are available for detoxing from opiates, benzodiazepines, alcohol and barbiturates. In some cases, particularly for
the last three types of drugs, detoxing may be a medical necessity, and untreated withdrawal may be medically dangerous or even fatal.

The detox process, partly because it is short-term, is not designed to deal with the psychological, social, and behavioral problems associated with addiction; thus should be considered the starting point for other treatment interventions aimed at abstinence.

Counselling and psychotherapy:

Counseling and psychotherapy form integral parts of most forms of treatment. They aim at initiating and maintaining behavioural and lifestyle changes, and help to control urges to use illicit substances. Counselling is an intensive interpersonal process concerned with assisting people in achieving their goals or functioning more effectively. It uses a variety of methodologies and techniques, including motivational interventions, cognitive behavioural approaches (social skills training, stress management, anger management), relapse prevention, provision of incentives, community reinforcement therapies and family interventions. Psychotherapy is generally a longer-term process concerned with reconstruction of the person and larger changes in more fundamental psychological attributes, such as personality structure.

Pharmacotherapy:

Pharmacotherapy involves the use of prescribed medications to support the patient in stabilizing his/her life and reducing or eliminating the use of a particular illicit substance. Pharmacotherapies are often accompanied by psychological and other treatment.

Self help:

Self help approaches involve admitting that one is powerless over one’s drinking/drug taking and over one’s life because of drinking/drug taking, turning one’s life over to a ‘higher power’, making a moral inventory and amends for past wrongs, and offering to help other people with addiction problems.

Continuing care/aftercare:

As the patient progresses, the intensity of treatment decreases and the final part of the treatment entails continuing individual and group support in order to prevent a return to substance use. Full rehabilitation and reintegration requires efforts at all levels of society.

Role of Parents, Teacher and Citizens in Prevention of Drug Abuse:

One can keep oneself away from drug abuse. Our socio-cultural environment does not approve it. Attitudes concerning smoking, drinking and other drug abuse are formed, usually during preadolescence and early adolescence. Hence interventions for prevention must begin early. Parents and teachers play decisive roles in helping children cultivate proper attitude towards drugs and to stay away from drug abuse.
As a Parent:

Parents have the most important influence on their children. Despite the fact that children today are exposed to various factors, parents continue to be role models for an overwhelming majority of them. Parents can make the following efforts:

- Communicate openly with your child and be a patient listener. Build a close relationship by conversing with your child and try to understand and respect his/her point of view.
- Keep yourself interested in your child's activities and friends. Try to make him/her aware of the implications of peer pressure and how to deal with it tactfully and effectively.
- Help your child to develop self-confidence. Try to examine his/her behaviour carefully and be critical to actions and not the person.
- Share with your child the problems at home and try to know his/her own problems. The child should be encouraged to participate in the solution of domestic problems and also to solve his/her personal problems.
- Help your child appreciate values and norms and try to inculcate in him/her skills and judgment to keep away from drugs.
- Parents are the best role models for their children. Set an example before your child by not taking drugs yourself. Remember that your actions speak louder than your words.
- Be aware of the company that your child keeps as young people are highly influenced by their peers and friends.
- Learn as much as you can about drugs. If unfortunately your child has fallen prey to drugs, try to tackle the problem with utmost sensitivity and care.

As a Teacher:

- Whenever you get appropriate time while teaching or informally, discuss with learners the problem and consequences of drug abuse.
- Keep yourself interested in your learners' activities and their interests. Observe continuously their behaviour within and outside the classroom.
- Encourage them to volunteer information on any incidence of drug abuse. Encourage discussion among them on the issue of drug abuse. Try not to pontificate and do not adopt the didactic approach while moderating the discussion.
- Try to share the problems, academic and personal of your learners and guide them on how to handle their problems. Be careful in advising them and try not to make any value judgment on their views and actions.
- Help them examine their career options and encourage them to set attainable goals and achieve those goals.
- Learn as much as you can about drugs. If unfortunately any of your learners has fallen victim to drug abuse, try to tackle the problem with great care by cooperating with his/her family.
As a Citizen:

- Try to know about different aspects of the menace of drug abuse through various sources.
- Remain alert to requests for keeping/carrying drugs.
- Whenever and wherever you notice cannabis plants/crops, inform the nearest law enforcing authority.
- If you come across anything suspicious regarding drugs, inform the law enforcing authority, even anonymously.
- Advise and help addicts to seek treatment from hospitals or counseling/de-addiction centres. Try to extend all-possible help in rehabilitation of an individual who has got rid of drug addiction.

Governments: also have an important role in making stringent laws and implementing them efficiently so that misuse and abuse of drugs is minimized.

**Summative Activity: Question Box on prevention of substance abuse**

**Learning Objectives:**

- To clarify questions/concerns related to substance use/abuse, its signs, symptoms, causes, consequences, negative and positive peer pressure, protection from substance/drug abuse and support those who may be into substance abuse

**Time required:** 45 minutes

**Materials required:** Question box, paper and pen

**Notes for the facilitator:**

Please note this is a key, mandatory activity. Please collect the questions asked by the learners after the activity has been entirely completed and send these to NCERT. These questions will form important sources of information for a needs-based assessment

**Planning the Activity:**

- It is important to create an enabling environment where the learners are encouraged to ask questions to resolve their concerns/queries
- Question box should be introduced at the beginning of the section and learners should be encouraged to put questions that they are hesitant to share in the large groups into the box. The facilitator should remind the learners about the question box frequently so that it is well used
- The question box should be placed in a safe and accessible place and should be locked
- At least at the end of each of the three sections: process of growing up, prevention of HIV/AIDS and prevention of substance abuse, the questions in the box should be discussed. If needed, more than one session can be organized for resolving queries in each section
• A time frame should be specified for putting in the queries and answering the questions
• The facilitator and the selected learners should sort through the questions
• After sorting, the facilitator should decide how to respond to queries. They may need to refer to additional resource materials for answering some of the questions.
• They can adopt a participatory approach in responding to these questions by asking the learners who think they know answers to respond to them.

**In school settings:**

• Teachers may use their discretion to organize the question box activity for all the students of classes 9 and 11 at the same time or separately for classes 9 and 11. If the school administration thinks it necessary to organize the activity separately for boys and girls, they may do so. However, in the interest of building a common understanding on issues related to adolescent health and well being; it is desirable to organize common sessions after the first few sessions
• Students should be involved at all stages of this activity in terms of planning and conducting it. Concerned teachers and school principal may make a beginning by motivating a small group of students selected from different classes for this purpose. To increase student participation, a new group of students may be involved each time the question box activity is organized.
• Teachers may take the help of external experts in answering some of the questions. **If parents can serve as experts, they should be given preference. These forums can serve as important opportunities for involving parents in the program.**
• However, teachers are strongly encouraged to respond to as many questions as possible on their own. This will prove to be an empowering experience for them also. They should refer to additional resources/references if needed.

**Conducting the Activity:**

• Learners will ask a wide range of questions. It is critical that the facilitator does not judge these questions as being ‘right’ or ‘wrong’
• Facilitators’ efforts should be directed at responding to the learning needs in as non judgmental a manner as possible
• It is likely that facilitators may be embarrassed by some of the questions that are being asked. This is understandable since all the facilitators may not perhaps have had sufficient training opportunities or experience of transacting such questions. In this context it would help facilitators if they remain matter of fact and information oriented in their approach

After responding to all the questions, the facilitator may sum up the discussion emphasizing the following issues:

• Commonly abused substances among adolescents are tobacco and alcohol which are a gateway to use of other drugs.
• Need for critically analyzing issues related to drugs/substances, because socially acceptable drugs are abused and even many legal drugs can be abused. Lay emphasis that casual initiation of abuse of drugs leads to addiction and dependence that involve increasing
tolerance, development of withdrawal symptoms and disruption of psychological, occupational and social functioning. No one starts taking substances with the aim of getting addicted to them. Most drug addicts start using drugs out of curiosity or to have some wrongly assumed pleasure. Some take to drugs, as they wrongly believe that it will help them overcome their boredom, depression, stress and fatigue.

- The signs and symptoms vary depending upon the kind of drug that has been abused.
- Factors which make adolescents vulnerable to serious substance abuse are poor self-esteem, family history of substance abuse, low achievement at school, family instability, history of abuse and aggressive/impulsive personality. Factors like relatively easy availability of drugs, community norms, influence of media also are responsible for abuse of drugs.
- In most cases peer pressure has been found to be one of the major reasons for initiation into smoking, drinking and even abuse of other drugs. Children whose peer groups engage in problematic and risky behavior are more likely to engage in the same kind of behavior.
- Peer group has a positive influence also
- Peer pressure can be managed by being well aware of the implications of drug abuse and developing skills to manage peer pressure. One can not only save oneself from adopting risky behaviour under peer pressure but also persuade the peer group from being away from such behavior.
- When the pressure to drug is too much the person may take the assistance of the wide “safety net” that surrounds us all. This safety net includes the parents, the teachers, elders, relatives, peers, counselors and guides, health professionals or even government including police dealing with narcotics or non-government organizations.
- The awareness about different Laws is necessary to protect oneself and others from the menace of drug/substance abuse.
- Drug abuse leads to drug addiction with the development of tolerance and dependence. Tolerance refers to a condition where the user needs increasing amount of the drug to experience the same effect. Smaller quantity that was sufficient earlier becomes ineffective, hence the user is forced to increase the amount of drug intake at regular intervals. This is referred to as the state of dependence.
- Drug abuse leads to physical and psychological dependence. Some drugs produce only physical dependence while others produce both physical and psychological dependence.