SUBSTANCE ABUSE AMONG HIGH SCHOOL DROPOUTS IN TRIVANDRUM DISTRICT

Dissertation submitted to the University of Kerala in partial fulfilment of the requirements for the award of the degree of

Masters of Social Work

Submitted by

Akhilash B.R

Exam code: 91514402

Candidate code: 91515115002

Subject code: SW 245



Department of Social Work Loyola College of Social Sciences Thiruvananthapuram, Kerala 2015-2017

DECLARATION

I, Akhilash B.R , do hereby declare that the dissertation work entitled **"Substance abuse among high school dropouts in Trivandrum district"** submitted in partial fulfilment for the award of the degree of Master of Social Work is a bonafide record of work carried out by me and no part thereof has been submitted for the award of any other degree in any University.

Thiruvananthapuram

Akhilash B.R

22/08/2017

CERTIFICATE OF APPROVAL

This is to certify that the dissertation entitled "Substance abuse among high school dropouts in Trivandrum district" is an authentic record of genuine work carried out by Mr. Akhilash. B R, fourth semester student in Master of Social Work under my supervision and guidance that is hereby approved for submission.

Fr. Saji J Faculty Department of social work Loyola college of Social sciences

Recommended for forwarding to the University of Kerala

Dr. Sonny Jose

Head of the Department of social work

Loyola college of Social sciences

Recommended for forwarding to the University of Kerala

Dr. Saji P Jacob

Principal in charge

Loyola college of Social sciences

Thiruvananthapuram

22/08/2017

ACKNOWLEDGEMENT

I am pleased to acknowledge my sincere gratitude and indebtedness to a number of personalities and institutions. It is a proud privilege for me to express my deep sense of gratitude to my respected supervisor and guide, Father Saji ,J .Faculty, Department of social work for his able guidance at each and every step of my work, for his constant encouragement, insightful, thoughtful comments and above all for his patience, genuine concern, sincere support, valuable suggestions and commitment without which the work done so far would not have been successfully accomplished.

I wish to express my gratitude to Dr Sonny, Head of the Department social work, Loyola College of Social sciences for rendering all possible assistance to me at the appropriate moments.

I am grateful to the faculty, Ms. Francina P X and Father Sabu, Department of social work, Dr. Sunil Kumar, librarian Loyola College of Social sciences for their thoughtful and valuable suggestions during the course of work.

I am grateful to all the respondents, who richly contributed to the study.

I am indebted to my esteemed parents and friends who are the source of inspiration and encouragement at all times during the preparation of this work.

Last but above all, I thank the Almighty God with all my heart and soul who blessed me with right thoughts and power to convert those thoughts into action.

I also thank all the people, including those whose names I have not mentioned here for their encouragement and support in the timely accomplishment of the present work.

Akhilash B.R

TABLE OF CONTENTS

CHAPTER	PAGES
TITLE	i
DECLARATION	ii
CERTIFICATE OF APPROVAL	iii
ACKNOWLEDGEMENT	iv
INTRODUCTION	01-05
REVIEW OF LITERATURE	06-22
METHODOLOGY	23-26
CASE PRESENTATION	27-39
CASE ANALYSIS	40-44
FINDINGS, SUGGESTIONS AND CONCLUSION	45-47
BIBLIOGRAPGHY	47-50

CHAPTER 1

INTRODUCTION

It is undeniable fact that not only for access of formal education, literacy is very important for maintaining good quality of life of human beings throughout the world and the functional literacy plays significant role in this direction. Without making the people literate we can't think about any kind of education. In true sense education constitutes good awareness, knowledge, understanding, application, skill, values and attitude, aptitude and ultimately peace among the peoples of any country of the whole world. Education is a fundamental pillar of human rights, democracy, sustainable development and peace.

Even today, Indian population is lagging behind in the field of Universalization of Elementary Education and hundred percent literacy up to the age level of 14 years. Today we are having more than 64 percent literacy rate only in our country. Drop out is a great problem in Indian Education System in each and every level of schooling. If the education system of our country has become good and approachable with best facilities to each and every child of the Nation then there is no any problem of wastage and stagnation, drop out is one of them. It is general phenomena that drop out exists in each and every class level of schooling but high rate of drop out is dangerous for the existing education system and for the society as a whole.

In our country the drop out means that leaving students from school before completing five years of Primary education and eight year elementary education. In the field of education, well accepted dictionary of Education by C.V. Good (1973) states that "Most often designates an elementary or Secondary School pupil who has been in membership during the regular school term and who withdraws or is dropped from membership for any reason except death or transfer to another school before graduating or before completing an equivalent

progress of studies; such an individual is considered a dropout whether his dropping out occurs before or after he has passed the compulsory school attendance age."

Adolescence is a crucial period for the beginning and experimentation with new things. The situation of drug abuse in adolescence is becoming a global health problem and is reaching at alarming position in India. Therefore, the research on substance abuse has also been receiving attention in developing countries like India because of changing trends in the prevalence of substance use and the rising magnitude of the problem. When the adolescents first experiment with drugs, people perceive that it has much adverse effects over their life and if continuous it may become necessity for user to feel normal. They may continue to take drugs even though it may cause tremendous problems for themselves. It was seen by many researchers & clinicians that substance use disorder during adolescence age share many similarities as well as differences when compared to other psychological disorders. There are many researches related to use & risk factors associated with drug abuse among adolescents but there are still many contradictions found in these researches. A large number of students across all age groups has been exposed to alcohol, tobacco, miraa (Khat), glue, bhang (Marijuana), and even hard substances such as heroin and cocaine. The practice has resulted in a number of negative effects in institutions of learning such as truancy, theft, rudeness, dropouts, injuries, loss of lives, destruction of properties, draining away of morals, misallocation of resources, indiscipline, and compromised academic standards among others which pose serious challenges to managers of the educational institutions. (Allensworth, 2005).

1.1 STATEMENT OF THE PROBLEM

The dropout problem is pervasive in the Indian education system. Many children, who enter school, are unable to complete secondary education in multiple factors are responsible for children dropping out of school. Risk factors begin to add up even before students enroll in

school that include: poverty, low educational level of parents, the weak family structure, pattern of schooling of sibling, and lack of pre-school experiences. Family background and domestic problems create an environment which negatively affects the value of education. Further, students could drop out as a result of a multitude of school factors such as uncongenial atmosphere, poor comprehension, absenteeism, attitude and behaviour of the teachers, and failure or repetition in the same grade, etc. When students experience school failure, they become frustrated with lack of achievement and end up alienated and experience exclusion leading to eventual dropout. Dropping out is a process that begins well before high school, and students exhibit identifiable warning signs at least one to three years before they drop out (Allensworth,2005). The main reason young people leave school is substance abuse.. As noted, this may be reflected in poor achievement, frequent absences, and behaviour problems. Many studies have been conducted on adolescence drug abuse since long but very few studies are found in India and need to be focused. The present study mainly focuses on substance abuse among high school dropouts in Trivandrum district.

1.2 SIGNIFICANCE OF THE STUDY

Substance abuse continues to present a problem which learning institutions should address. This is so because there has been an overall increase in the abuse of substances among students in learning institutions. Over 400,000 students were abusing substances out of which 160,000 were girls (Mayoyo, 2003). Substance use remains at high levels among high school students in the in India given troubling statistics regarding high dropout rates and poor readiness skills among our nation's high school students, it is urgent that we recognize the contribution of substance use to these problems. High schools must implement innovative solutions, which should include reducing substance use by students as an important part of a

comprehensive plan to enhance social and emotional development and to promote skill acquisition. This approach will ensure that students are well prepared for the challenges they will face after graduation and as they become young adults.

While substance use is only one of many problems related to dropout, addressing it is one essential component of a comprehensive solution to the dropout crisis. Such complex problems demand complex solutions. It is commonly accepted that if early educational difficulties are present in a third-grade child, then educational systems and families must act to detect and intervene to improve that child's chances of educational success. If early onset alcohol or drug use is present in a seventh-grade or any other age child, then similarly, educational systems and families must detect and intervene to improve that child's chances of educational systems and families of educational systems and families must detect and intervene to improve that child's chances of educational success and reduce the likelihood of all outcomes typically associated with adolescent substance use. And for those who have already dropped out, because they are at enormous risk, there must be mechanisms in place to assess and address their drug, alcohol, and mental health issues and to help them get back on track.

1.3 RESEARCH QUESTIONS

General research question

What factors lead among the high school dropouts to substance abuse?

Specific research question

- What are the socio-economic background of the respondents.?
- What were the reason for dropout ?
- What are the types and nature of substance abuse among high school dropouts.?
- What are the environmental factors which influence the addiction of substance abuse among the high school drop outs?

1.4 DEFINITION OF CONCEPTS

Theoretical Definition

Substance abuse: Substance abuse can be defined as harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. Psychoactive substance use can lead to dependence syndrome - a cluster of behavioural, cognitive, and physiological phenomena that develop after repeated substance use and that typically include a strong desire to take the drug, difficulties in controlling its use, persisting in its use despite harmful consequences, a higher priority given to drug use than to other activities and obligations, increased tolerance, and sometimes a physical withdrawal state.

Dropouts: Dropout is defined as "any student who leaves school for any reason before graduation or completion of a program of studies without transferring to another elementary or secondary school."

Operational Definition

Substance abuse: Substance abuse also known as drug abuse, the form of addiction in any substances like cigarette, alcohol, pan masala etc which are harmful to themselves or others. **Dropouts:** A person who stops going to high school, before finishing the academic course because of some personal or social problems.

CHAPTER II

REVIEW OF LITERATURE

The progressive growth of any scientific discipline is marked explicitly by its professional literature. For a worthwhile study in any field of knowledge, the investigator needs an adequate familiarity within the area. A literature review goes beyond the search for information and includes the identification and articulation of relationships between the literature and the field of research.

The survey of related literature helps the researcher to find what is already known, what others have attempted to find out and what is still unknown and untested. It is valuable guide for defining problem, recognizing its significance and formulating hypothesis, suggesting appropriate research design and source of data.

Characteristics of Dropouts and Their Needs

Drop out of regular schools have many and varied needs.

- While in the education system, they typically have trouble adjusting to school. This is reflected primarily in poor scholastic achievement, frequent absences, and behaviour problems.
- Dropouts are also characterized by extensive marginal behaviour, such as substance abuse and delinquency.
- High school dropouts have been found to have poorer self-efficacy than their peers who remain in school.

- Many dropouts live in families that have low socio-economic status and suffer severe financial hardship, or come from single-parent families, or from large families with four or more children.
- A large percentage of dropouts come from families in which one or both parents have a serious problem functioning (e.g., a chronic illness or disability, involvement in crime, unemployment). Significant percentages of these youth are exposed to neglect and violence.

Some of the students who choose alternative vocational frameworks do so to receive vocational training while still in high school. Only a minority of students leave school in order to contribute to their family's income.

Substance abuse

Substance abuse refers to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. Psychoactive substance use can lead to dependence syndrome - a cluster of behavioural, cognitive, and physiological phenomena that develop after repeated substance use and that typically include a strong desire to take the drug, difficulties in controlling its use, persisting in its use despite harmful consequences, a higher priority given to drug use than to other activities and obligations, increased tolerance, and sometimes a physical withdrawal state.`

Susbstance Abuse is characterised by repeated use of a substance or substances in situations where use leads to or contributes to markedly negative outcomes. Defining substance abuse can be difficult Abuse refers to the use of a substance when it is not medically inprohibitable.

Diagnostic Criteria for Substance Abuse (DSM IV TR)

A. A maladaptive pattern of substance use leading to clinically significant impairment or distress, as manifested by one (or more) of the following, occurring within a 12-month period:

- (1) recurrent substance use resulting in a failure to fulfil major role obligations at work, school, or home (e.g., repeated absences or poor work performance related to substance use; substance-related absences, suspensions, or expulsions from school; neglect of children or household)
- (2) recurrent substance use in situations in which it is physically hazardous (e.g., driving an automobile or operating a machine when impaired by substance use)
- (3) recurrent substance-related legal problems (e.g., arrests for substance-related disorderly conduct)

(4) continued substance use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of the substance (e.g., arguments with spouse about consequences of intoxication , physical fights)

B. The symptoms have never met the criteria for substance dependence for this class of substance.

International Studies Related On School Dropouts and Drug Abuse

High school seniors who dropped out of school before graduating were more likely to drink, smoke cigarettes and use marijuana and other illegal drugs, according to a new report from the U.S. Substance Abuse and Mental Health Services Administration. Dropouts are at increased risk of substance abuse, which is particularly troubling given that they are also at greater risk of poverty, not having health insurance, and other health problems. We have to do everything we can to keep youth in school so they can go on to lead healthy, productive lives, free from substance abuse. (Dallas, 2013)

Social and Cultural Aspects of Drug Abuse in Adolescents

Almost all cultures have used psycho-active drugs to facilitate social interaction, to alter consciousness, to heal. Our society's expanded chemical manipulation simply represents a large technical capacity, more wealth, leisure, individual choice and, conversely, a reduction in constraining social settings, peer and family standards, and personal proscriptions as to what is not done.1 Drug abuse behaviour like human behaviour in general is conceived of as an outcome of genetic and biochemical characteristics, past learning experiences, motivational states, psychosocial antecedents, and cultural context in which it unfolds. These conditions assume a considerable variety in drug-abuse behaviour. Among these, social and cultural factors play an important role in initiation, maintenance and therapeutic intervention of drug-abuse. Social norms, the shared rules, that specify appropriate and inappropriate behaviours; mores, that people consider vital to their well-being and to their most cherished values and sanctions, the socially imposed rewards and punishments that compel people to comply with norms, constitute important ingredients of a culture. Culture is defined as shared values, beliefs, norms, traditions, customs art, history, folklore and institutions of a group of people. (Jiloha, 2009)

No single or generic set of variables explains the misuse of substances for every individual. Depending on an individual's biological makeup, developmental stage, and interaction with various environmental forces, individual risk, vulnerability, and resilience to substance abuse and addiction will vary for different factors at different times2. Indian society, which enjoys cultural diversity, has a history of use of plant products, viz., cannabis, opium, and home brewed alcohol beverages within a defined socio-cultural framework over five millennium. There are certain social groups which are more vulnerable to substance abuse. Caste, religion and local customs and traditions play significant role in the choice of drugs, their consumption and their control in rural/semi-urban populations. Though some workers describe Indian society to be traditionally abstinent, the recent developments do not support this concept. (Lynch BS, and Bonnie RJ, 1994)

Substance abuse is a growing problem in India. Earlier considered to be a problem of street children, working children and trafficked children, it has now become a wide spread phenomenon affecting all segments of the society. Substance abuse especially among adolescents has become an issue of concern throughout the world. Adolescents start on drugs for several reasons, from curiosity, recreation for pleasure, and as a need to cope with stress. In India approximately 5500 children and adolescent start using tobacco products daily, some as young as 10 years old. Particularly alarming is the fact that the age of initiation in substance abuse is progressively failing. (UNDCP, 1999)

Previous researches have shown that significantly higher proportion of substance abuse was associated with predisposing factors like joint family, parental abuse status, working status, and illiteracy/school dropout, migration, loosening of the traditional methods of social control, etc. So it becomes more important to examine these factors in the fast changing social milieu. As the previous studies have highlighted the higher prevalence among boys, hence the current study is being focused on boys for studying the pattern of substance abuse so that appropriate strategies can be developed for preventing and controlling the rising problems. (Sarangi L, Himanshu P, Acharya O, P Panigrahi., 2008)

A minimum sample size of 489 was calculated, considering the 45% prevalence as per the previous study of the area with sampling error of 10% and 95% confidence limit. A list of all the Government intermediate colleges in the block was obtained from the Department of

Education and girl's colleges were excluded. (There are only two types of colleges in the block-co-education College and Girls College.) Block Doiwala was divided into four imaginary sectors having almost equal number of colleges. One college was randomly selected from each of these four sectors. All the male adolescent students (up to 19 years of age) of the classes 10th to 12th in these four colleges were included in the study after taking informed consent. Students were assured of confidentiality. A total of 511 students participated in the study. Approximately 5000 male adolescents attending 10th to 12th class in Government schools constituted the sampling frame (Taveres BF, Beria JU Silva MS, 2001)

The study was conducted during the month of August and September 2009. Data were collected by trained investigators by an interview method. A questionnaire originally developed by WHO was used after certain modifications, in Hindi language after validation. The questionnaire was pretested also and used only after incorporation of necessary. (Benegal V, Seshadri S, Karott M, 1998)240 (46.9%) adolescents gave the history of substance abuse. Increasing age was found significantly associated with the increasing prevalence of substance abuse (P<0.01). Highest percentage of abuse was observed in 12th class students. It was observed that adolescents from the business class families followed by Government servants were more involved in substance abuse than the children of farmers and labourers and the finding was highly significant (P<0.01). (Patel DR, Greydanus DE, 1999)

Most of substance abuser (55.3%) reported initiation of substance abuse from the age of 14-15 years. In most of the cases, friends were providing the substances (75.5%). Supari/gutkha/pan was found to be the most common substances (56.2%) followed by beedi tobacco and cigarette (33.1%). In 8.7% cases, adolescents were found to be taking alcohol. In most of the cases, substance abuse was done in the evenings (63%) or in the afternoon (27%). In 55% cases, adolescents reported use of their pocket money for purchasing the substance. In 40.8% cases, money was provided by their friends. (Juyal R, Bansal R, Kishore S, Negi KS, Chandra R, Semwal J, Med 2006)

Consequences of substance abuse and quitting the habit: In 68.7% of cases, adolescents did not report any adverse symptoms, but in 26% cases adolescent reported craving for the substance. In 5.6% cases, it was reported that they have increased the quantity or added some other drug for getting the same hike. 80.2% substance abusers express their desire to quit the habit.

The study also finds that the adolescents with both parents alive showed a higher percentage of substance abuse (47.7%) than the broken families (34.4%). In contrast to the study findings, Benegal et al. in 1999 reported higher percentage (55%) of substance abuse among children of broken families from urban slums in Bangalore. (Benegal V, Seshadri S, Karott M, 1998)

Strikingly, the study has reported a higher percentage of substance abuse among adolescents having a good relationship with family members (44.3%) may be because of unsupervised availability of money in those families than in the families having tensed relationship. Unavailability or inaccessibility of money to adolescents could also be reason for having tensed relationship. The study reported higher levels of substance abuse in nuclear families (48.8); however, Sarangi et al. (2008) reported significantly higher proportion of substance abuse among adolescents from joint family (47.3%) (Rao B, Sridhar, Wanta M, Mallarpur AS, 1981)

The study also revealed that highest percentage of drug abusers (61.3%) are coming from business-class families and the least from the families where father is involved in farming (34%). Naskar et al. in a study from Calcutta reported similar percentage of drug users among business-class families (62.7%); however, Rao et al. reported only 27.82% cases of drug abuse in the business-class families in study conducted in Belgaum indicating that the effect of occupation varies from place to place. (Naskar NN, Roy M, Bhattacharya S K, 2004)

As per the study, most of the adolescents started with substance abuse around 14-15 years of age (55.3%) through their friends/peer groups as the frequent substance provider to them (75.5%). Sarangi et al. have reported similar findings of substance abuse initiation around the mean age of 14.65 ± 0.65 . She has also reported in 0.4% cases, family member as the source of their first drug use which is the same as per our study. Peer pressure was the most common factor for substance abuse (52.8%) in the study by Sarangi et al. and Bansal et al., similar to our study findings of where it is revealed that in most of the cases (75.5%) friends were providing the substances. Naskar et al. in 2004 have reported lower percentage of friends as the substance provider to college students (47.5%) (Jiloha, 2009)

Supari/gutka/pan was the most common substance of abuse in the present study (57.2%). Cigarette and tobacco were found to be second most common substances abused by adolescents (33.1%). Sarangi et al. have reported gutka (91.7%) as the most common substance abused by urban slum adolescents followed by pan. In the present study, it was found that 55.4% adolescents were using the pocket money for purchasing these substances; similarly, Sarangi et al. also reported that a majority of adolescents (69.8%) purchased substance for abuse from their self-earning. In the study, 58.3% of the substance abusets had one of the family members also indulged in substance abuse. Sarangi et al.

al. reported lower percentage of (46.7%) substance abusers as the family members. (Sarangi L, Himanshu P, Acharya O, P Panigrahi. , 2008)

In our study, 26% of the cases in adolescents reported craving for substance which indicates toward their dependence on the substance; even some of them have increased their quantity and have added other drugs as a cocktail to get the same hike (5.6%). A similar report of use of multiple substances by the substance abusers was seen by Sarangi et al. among urban slum adolescents (3.34 substances abused per adolescents). (Rao B, Sridhar, Wanta M, Mallarpur AS, 1981)

The present study revealed that 80.2% of the substance abusers expressed their desire to quit the habit. A similar percentage of all substance abusers among the adolescent street boys in the Mumbai city also wanted to quit to the study conducted by Abhay et al. Most of the adolescents who wanted to quit the habit were self-motivated (Jiloha, 2009) The study showed a relatively higher rate of prevalence of substance abuse with increasing literacy status among school going adolescents, who are from economically stable families with good familial relationship. With the support of peer group and pocket money provided by fam

ily they get into the habit of substance abuse. A majority of them take substances in the afternoon or evenings. Hence, there is need for developing peer group-based interactive and interesting activities which can be organized in the evening hours /after school timings for the adolescents for channelizing their energy in positive direction. (Abhay MG, Zahiruddin QS, Waghmare L, Shanbhag S, Zodpey S, Joharapurkar SR, 2008)

2.3 Risk Factors and Protective Factors of Drug Abuse

The risk of becoming a drug abuser involves the relationship among the number and type of risk factors (e.g., deviant attitudes and behaviors) and protective factors (e.g., parental support) (Wills, T. and Cleary, S, 1996)

The potential impact of specific risk and protective factors changes with age. For example, risk factors within the family have greater impact on a younger child, while association with drug-abusing peers may be a more significant risk factor for an adolescent (Gerstein, D.R., and Green, L.W., eds., 1993)

Early intervention with risk factors (e.g., aggressive behaviour and poor self-control) often has a greater impact than later intervention by changing a child's life path (trajectory) away from problems and toward positive behaviours. (Ialongo, N.; Poduska, J.; Werthamer, L.; and Kellam, S, 2001)

Risk factors for drug abuse represent challenges to an individual's emotional, social, and academic development. These risk factors can produce different effects, depending on the individual's personality traits, phase of development, and environment. For instance, many serious risks, such as early aggressive behaviour and poor academic achievement, may indicate that a young child is on a negative developmental path headed toward problem behaviour. Early intervention, however, can help reduce or reverse these risks and change that child's developmental path (Lochman, J.E. and Wells, K.C, 2002.)

For young children already exhibiting serious risk factors, delaying intervention until adolescence will likely make it more difficult to overcome risks. By adolescence, children's attitudes and behaviours are well established and not easily changed. (Hawkins, J.D.; Catalano, R.F.; and Arthur, M., 2002)

Risk factors can influence drug abuse in several ways. They may be additive: The more risks a child is exposed to, the more likely the child will abuse drugs. Some risk factors are particularly potent, yet may not influence drug abuse unless certain conditions prevail. Having a family history of substance abuse, for example, puts a child at risk for drug abuse. However, in an environment with no drug-abusing peers and strong antidrug norms, that child is less likely to become a drug abuser. And the presence of many protective factors can lessen the impact of a few risk factors. For example, strong protection such as parental support and involvement can reduce the influence of strong risks, such as having substanceabusing peers. An important goal of prevention, then, is to change the balance between risk and Gender may also determine how an individual responds to risk factors. Research on relationships within the family shows that adolescent girls respond positively to parental support and discipline, while adolescent boys sometimes respond negatively. Research on early risk behaviors in the school setting shows that aggressive behavior in boys and learning difficulties in girls are the primary causes of poor peer relationships. These poor relationships, in turn, can lead to social rejection, a negative school experience, and problem behaviors including drug abuse. (Greenberg, M.T., and Kusche, C.A, 1998)

Some signs of risk can be seen as early as infancy. Children's personality traits or temperament can place them at increased risk for later drug abuse. Withdrawn and aggressive boys, for example, often exhibit problem behaviors in interactions with their families, peers, and others they encounter in social settings. If these behaviors continue, they will likely lead to other risks. These risks can include academic failure, early peer rejection, and later affiliation with deviant peers, often the most immediate risk for drug abuse in adolescence. Studies have shown that children with poor academic performance and inappropriate social behavior at ages 7 to 9 are more likely to be involved with substance abuse by age 14 or 15.(Hawkins, J.D. and Catalano, R.F., 1992)

2.4 In the Family

Children's earliest interactions occur within the family and can be positive or negative. For this reason, factors that affect early development in the family are probably the most crucial. Children are more likely to experience risk when there is:

- lack of mutual attachment and nurturing by parents or caregivers;
- ineffective parenting;
- a chaotic home environment;
- lack of a significant relationship with a caring adult; and
- a caregiver who abuses substances, suffers from mental illness, or engages in criminal behavior.

These experiences, especially the abuse of drugs and other substances by parents and other caregivers, can impede bonding to the family and threaten feelings of security that children need for healthy development. On the other hand, families can serve a protective function when there is:

- a strong bond between children and their families;
- parental involvement in a child's life; supportive parenting that meets financial, emotional, cognitive, and social needs;
- clear limits and consistent enforcement of discipline.

Finally, critical or sensitive periods in development may heighten the importance of risk or protective factors. For example, mutual attachment and bonding between parents and children usually occurs in infancy and early childhood. If it fails to occur during those developmental stages, it is unlikely that a strong positive attachment will develop later in the child's life. (Sussman, S.; Dent, C.W.; and Stacy, A.W., 2002)

2.5 Outside the Family

Other risk factors relate to the quality of children's relationships in settings outside the family, such as in their schools, with their peers, teachers, and in the community. Difficulties in these settings can be crucial to a child's emotional, cognitive, and social development. Some of these risk factors are:

- inappropriate classroom behavior, such as aggression and impulsivity;
- academic failure;
- poor social coping skills;
- association with peers with problem behaviors, including drug abuse; and
- misperceptions of the extent and acceptability of drug-abusing behaviors in school, peer, and community environments.

Association with drug-abusing peers is often the most immediate risk for exposing adolescents to drug abuse and delinquent behavior. Research has shown, however, that addressing such behavior in interventions can be challenging. For example, a recent study (Dishion et al. 2002) found that placing high-risk youth in a peer group intervention resulted in negative outcomes. Current research is exploring the role that adults and positive peers can play in helping to avoid such outcomes in future interventions.

Other factors—such as drug availability, drug trafficking patterns, and beliefs that drug abuse is generally tolerated—are also risks that can influence young people to start to abuse drugs.

Family has an important role in providing protection for children when they are involved in activities outside the family. When children are outside the family setting, the most salient protective factors are:

- age-appropriate parental monitoring of social behavior, including establishing curfews, ensuring adult supervision of activities outside the home, knowing the child's friends, and enforcing household rules;
- success in academics and involvement in extracurricular activities;
- strong bonds with prosocial institutions, such as school and religious institutions; and
- acceptance of conventional norms against drug abuse. (Greenberg, M.T., and Kusche,
- C.A, 1998) (Hawkins, J.D.; Catalano, R.F.; and Arthur, M., 2002)

2.5 Highest risk periods for drug abuse among youngsters

Research has shown that the key risk periods for drug abuse occur during major transitions in children's lives. These transitions include significant changes in physical development (for example, puberty) or social situations (such as moving or parents divorcing) when children experience heightened vulnerability for problem behaviours. (Palmgreen, P.; Donohew, L.; Lorch, E.P.; Hoyle, R.H.; and Stephenson, M.T., 2001)

The first big transition for children is when they leave the security of the family and enter school. Later, when they advance from elementary school to middle or junior high school, they often experience new academic and social situations, such as learning to get along with a wider group of peers and having greater expectations for academic performance. It is at this stage early adolescence that children are likely to encounter drug abuse for the first time. (Moon, D.; Hecht, M.; Jackson, K.; and Spellers, R. , 1999)

Then, when they enter high school, young people face additional social, psychological, and educational challenges. At the same time, they may be exposed to greater availability of drugs, drug abusers, and social engagements involving drugs. These challenges can increase the risk that they will abuse alcohol, tobacco, and other drugs. (Greenberg, M.T., and Kusche, C.A, 1998)A particularly challenging situation in late adolescence is moving away from home for the first time without parental supervision, perhaps to attend college or other schooling. Substance abuse, particularly of alcohol, remains a major public health problem for college populations. (Ialongo, N.; Poduska, J.; Werthamer, L.; and Kellam, S, 2001)

When young adults enter the workforce or marry, they again confront new challenges and stressors that may place them at risk for alcohol and other drug abuse in their adult environments. But these challenges can also be protective when they present opportunities for young people to grow and pursue future goals and interests. Research has shown that these new lifestyles can serve as protective factors as the new roles become more important than being involved with drugs. (Hawkins, J.D.; Catalano, R.F.; and Arthur, M., 2002) Risks appear at every transition from early childhood through young adulthood; therefore, prevention planners need to consider their target audiences and implement programs that provide support appropriate for each developmental stage. They also need to consider how the protective factors involved in these transitions can be strengthened. (Wills, T. and Cleary, S, 1996)

Studies such as the National Survey on Drug Use and Health, formerly called the National Household Survey on Drug Abuse, reported by the Substance Abuse and Mental Health Services Administration, indicate that some children are already abusing drugs by age 12 or 13, which likely means that some may begin even earlier. Early abuse includes such drugs as tobacco, alcohol, inhalants, marijuana, and psychotherapeutic drugs. If drug abuse persists into later adolescence, abusers typically become more involved with marijuana and then advance to other illegal drugs, while continuing their abuse of tobacco and alcohol. Studies have also shown that early initiation of drug abuse is associated with greater drug involvement, whether with the same or different drugs. Note, however, that both one-time and long-term surveys indicate that most youth do not progress to abusing other drugs. But among those who do progress, their drug abuse history can vary by neighborhood drug availability, demographic groups, and other characteristics of the abuser population. In general, the pattern of abuse is associated with levels of social disapproval, perceived risk, and the availability of drugs in the community. (Sussman, S.; Dent, C.W.; and Stacy, A.W. , 2002)

Scientists have proposed several hypotheses as to why individuals first become involved with drugs and then escalate to abuse. One explanation is a biological cause, such as having a family history of drug or alcohol abuse, which may genetically predispose a person to drug abuse. Another explanation is that starting to abuse a drug may lead to affiliation with more drug-abusing peers which, in turn, exposes the individual to other drugs. Indeed, many factors may be involved (Thompson, E.; Horn, M.; Herting, J.; and Eggert, L., 1997) Different patterns of drug initiation have been identified based on gender, race or ethnicity, and geographic location. For example, research has found that the circumstances in which young people are offered drugs can depend on gender. Boys generally receive more drug offers and at younger ages. Initial drug abuse can also be influenced by where drugs may be offered by different people including, for example, siblings, friends, or even parents. (Rao B, Sridhar, Wanta M, Mallarpur AS, 1981)

While most youth do not progress beyond initial use, a small percentage rapidly escalate their substance abuse. Researchers have found that these youth are the most l ikely to have experienced a combination of high levels of risk factors with low levels of protective factors. These adolescents were characterized by high stress, low parental support, and low academic competence. (Thompson, E.; Horn, M.; Herting, J.; and Eggert, L., 1997)

However, there are protective factors that can suppress the escalation to substance abuse. These factors include self-control, which tends to inhibit problem behavior and often increases naturally as children mature during adolescence. In addition, protective family structure, individual personality, and environmental variables can reduce the impact of serious risks of drug abuse. Preventive interventions can provide skills and support to high-risk youth to enhance levels of protective factors and prevent (Botvin, G.; Griffin, K.W.; Paul, E.; and Macaulay, A.P., 2003)

CHAPTER: 3

METHODOLOGY

Methodology is the systematic, theoretical analysis of the methods applied to a field of study. It comprises the theoretical analysis of the body of methods and principles associated with a branch of knowledge. Typically, it encompasses concepts such as paradigm, theoretical model, phases and quantitative or qualitative techniques. This chapter details out the research methodology for the present study. It explains the research objectives and a suitable methodology to achieve those objectives.

3.1 Title

"Substance abuse among high school dropouts in Trivandrum district"

3.2 Research design

The research design refers to the overall strategy that you choose to integrate the different components of the study in a coherent and logical way, thereby, ensuring you will effectively address the research problem; it constitutes the blueprint for the collection, measurement, and analysis of data.

The research design adopted in the study is case study research design. The case study research design is an in depth study of a particular situation rather than a sweeping statistical survey.

3.3 Pilot Study

A pilot study is a small scale preliminary study conducted in order to evaluate feasibility, time, cost, adverse events, and affect size in an attempt to predict an appropriate sample size and improve upon the study design prior to performance of a full-scale research project. The researcher conducted a pilot study in the Trivandrum district and collected basic information from the school dropouts and discussed about the substance abuse and its side effects.

3.4 Universe and unit

- The universe of the study is the high school dropouts in in Trivandrum district.
- The unit of study is 1 high school dropout due to substance abuse.

3.5 Sampling

The sampling technique used in this study is purposive sampling. The participants have been chosen to participate in individual face-to-face semi structured interviews.

3.6 Sources of data

a) Primary Data

Primary data will be collected directly from the high school dropouts

b) Secondary data

Secondary data comprises of information from Documents, books, reports of surveys and studies, literature pertaining to substance abuse among high school dropouts and other relevant publications.

3.7 Tools and Techniques of Data Collection

Interview guide was used as the tool for data collection. Informal interview was the strategy followed by the researcher. In-depth Interviews and discussions were conducted as the techniques of data collection to elicit information from the respondents

3.8 Data collection

The researcher collected the data from 5 high school drop outs who are staying in Trivandrum. The researcher collected the data using informal interview.

3.9 Data analysis

The collected data will be analysed using descriptive method by identifying the core themes of each case.

3.10 Chapterisation

Chapter I: Introduction

Chapter II: Review of Literature

Chapter III: Research Methodology

Chapter IV: Data Analysis and Interpretation

Chapter V: Findings, Suggestions and Conclusion

3.11 Limitation of the study

The research gets limited time to collect data so that the number of cases included in the study is only 5.

3.12 Conclusion

The methodology gives an overall idea regarding the methods use in the study. The methodology helped to guide the researcher in systematic and scientific way of completing the study

CHAPTER 4

CASE PRESENTATION

Case –A

The researcher found the respondent through field work study. The respondent age is 20 and his family consists of four members father, mother, sister, and respondent. His mother is a home maker and the father is working abroad as a driver. Respondent's sister is a student and she is studying in 8th standard. The researcher made a casual talk with respondent's mother and talk to the respondent. When the researcher started interacting at first the respondent hesitated to say anything.

Through making a rapport with the respondent and his family. The researcher could collect data. The respondent explains that his childhood is more precious to him. Because the father and his mother gave more love and care to the respondent. And now a day the respondent didn't like to study because of learning problem. In childhood the respondent gets more support from the respondent's mother for discussion. After a long time she cannot help the respondent to correct his mistakes. So the respondent did not like to study. The respondent discontinued his study during 10th standard because of the difficulty to study. At the time of discussion respondent became very anxious and fearful. Gradually a certain level of rapport was built by the researcher to get the details collection from the respondent. That time the respondent tried to open up. Since his mother was sitting nearby respondent was hesitant in speaking. The respondent talks about the friends. The respondent's friends are also dropout. But some of them are using drugs inside the class. The researcher hears all things that done

by the respondent and his friends, and asked about the drugs or any type of substances used by the friends or they forced him to try it or not. The respondent denied that he took drugs. Because respondent's family didn't know about the use of alcohol and substances used by him. So the researcher took him for a walk outside with the permission of his mother. That is when respondent told everything to the researcher. The researcher starts with casual talk and it helps to build a good rapport with the respondent, helps the respondent to talk about the situation. He started to speak about his childhood and after that he started about his academics. In his childhood he didn't get a proper training for his studies. He didn't like to study. Because of that the respondent faced lots of problems from the teachers and from the students. He faced lots of tease from the teachers because of the learning disability. He cannot write well as read. So he bunks the class with his friends. Most of the time respondent spends time with his friends. He didn't like the teacher student relationship especially the class teachers who ask questions to him always. So he started to smoke with his friends. The respondent accepted that he had been taking drugs. Sometimes the respondent used the substances like opium, cannabis, etc. After 9th standard the respondent didn't like to go to school.so he disliked to go to school. But when he feels sad or lonely respondent took drugs. Respondent is scared of his father if he comes to know of this. His father comes only once in four years. Respondent say that his father will kill him when he knows about all. When his father knows these types of behavior is for the respondent must react to his father. Respondent explains that the parents didn't like him from the childhood and the parents give love and care for his sister. So respondent didn't like to go home. But he likes his sister. The respondent likes his sister very much so he went to home only for his sister's happiness. Respondent spent lot of time with his sister for playing games and little fights. After some years his mother behaves very rudely with respondent after knowing that he didn't go to school. The respondent leaves home in the morning with different aims. School is the

secondary factor for him. The respondent gave much importance to his friends as a primary factor. So he went to his friend's home and gathered there. And makes chitchat with friends.

There is an agent who supplies the substances to his friends. They are also not sure about the real supplier. As they receive the substances through different people every time. When there is a need they will message him and the agent will send back a rate for the stuff. If it is "OK" they agree. The drugs and substances are delivered in trains. Either the agent will say the train timing at "Murukkumpuzha" railway station. After using the substances the friends sleep in their house. After they get conscious they take their bike and leave. According to the respondent, these people look like Bob Marley. The respondent also likes curly hair. The friends gather at his house only when the mother is not there in his house. She went to "Tozhilurapp" that is the programme for ensuring 100 days of job for the people come under village or panchayat to reduce poverty. After using drugs if there is redness in eyes they use a liquid to remove the reddishness. The liquid is also given by his friends. But he needs to pay extra money for the liquid. At times when he need substance and his mother does not give him money he find some jobs.

The respondent says that "once I will die even though I used it or not.... So I decided to enjoy my life maximum". Now the respondent working in a workshop and the dream about taking a bike. Earlier he wanted to go to gulf with his father. But now he wants to just stay with his friends and spend time with them for lifetime. It is the wish of respondent.

CASE -B

The researcher collected the details of this respondent through the information provided by the respondent "B". He is 22 years old and belongs to a Christian family. The family consisting four members they are father, mother, brother and the respondent. Respondent's father is a daily worker. And mother is a home maker and the brother studied up to the higher secondary. The respondent's brother is going for painting for making money. But the respondent studied up to 10th standard.

The respondent is very smart in academics. But the socio-economic background is very poor. The respondent explains that it is the fate of them. During his childhood the respondent and his family was facing the scarcity of food, shelter, and the clothes. The respondent's father did not have much concern for the family. The respondent's father consumes alcohol daily and makes much nuisance for the neighbor's as well as the public. Due to this condition the respondent's mother did not go to any places. The mother survives lots of problems made by the respondent's father. The respondent's father is an alcoholic.

Currently the parents are separated. Mother ran away with a Muslim man and father is staying separately and he is a drunkard. Respondent and his brother were brought up by his grandparents. Respondent's brother is also a dropout. But the respondent's brother completed his high school graduation. The Respondent is 8th class dropout. After explaining the childhood experiences the respondent starts to explain about his friends and also the habit accumulated because of the respondent's father. Respondent used to roam with his friends and slowly got into smoking due to the peer pressure. At the age of 15 respondent started drinking too. The respondent explains that he give company for his friends. The respondent didn't miss any moment with his friends. There is only one aim for gathering is to consume alcohol. The respondent's friends bring an equal share to purchase the alcohol and other

things like cigarette for smoking. Respondent has around 25 more friends who are substance abusers.

Respondent is becomes a chain smoker and he says that "he smoke more than 10 cigarettes per day". Respondent's friends are more from the coastal area. Because of that the respondent residing near coastal area. Respondent used to do some work in the sea shore to earn money. Respondent explained about the addiction of substances and he used these substances at first when his mother ran away from the home, that time itself respondent's father behave very rudely with them. And also father becomes a drunkard. So that he used these stuffs with his friends like syringe, drops, powder, capsule etc. respondent has never use cannabis. The respondent says that he has an agent for providing these stuffs in "Varkala beach". The drug dealer is a tourist. So, the procedure to bring these stuffs or the materials is more complex to get and take more time. Most of the time the respondent used "COOL" that is a kind of drug put in his mouth. Respondent had been in jail for 25 days for having conflict with his friends. The friends tease him with this issue, so the respondent attacked them. The respondent explains that his mother didn't like them so she ran away.

Somehow addicted to it and continuous to used these types of substances whenever possible. While telling the whole things the respondent explains that if the researcher needs any type of drugs, the respondent will arrange and also the respondent get the commission for the sale of drugs.

The respondent knows that the use of drugs and this habit is not good but the respondent is not look at the researcher's face and explaining with the guilt or the craziness he were experienced new things and also continues this due to peer pressure. As of now respondent has no aim in life and there is no contact with his family members. Respondent go to home occasionally.

CASE- C

The researchers explore about the school dropouts and the detailed information and the information's are provided by the respondent "C". The age of the respondent is 21. In this case the respondent consists of 4 members Father, mother, brother, and the respondent. Respondent's father works in a merchant navy officer and respondent's brother studying in 6th standard. And his mother is a home maker. And the respondent is 10th standard fail because of the malpractices done in the exam hall. The researcher asked about the friends of the respondent. Respondent explains that he lives only because of his friends. They gave advice all the time so the respondent can spend lot of times with his friends through the mobile phones as well as they gathered all Saturdays in one of his friend's house.

The respondent is very intelligent and smart in academics. But the friends created the respondent as a hero. So the respondent do craziest thing in their life. The respondent didn't get any guidance from the family. So the respondent has the courage and doing many things for their friends. The respondent has no fear to do anything. Respondent thinks that he will get full support from the friends. The respondent has a bad habit like stealing things or money from his friends or classmates.

The respondent say that "I have no fear to take it. If the matter is becomes serious issue, I will give it back to my friend and make credit". The respondent explains it very simply. Respondent says that "that is my style style". After that the researcher asked about the school life. The respondent explains that it was too boring but I enjoyed it very well with his friends. Respondent mother is not interested with his studies. Because the respondent's mother not having much education. Respondent says that his mother didn't completed her 10th class. So she has shame to come the school. And all the things are looking by his father. Respondents have only fear about his father. Respondent's father beats every time when the marks are

becomes low. So the respondent starts to do malpractices in exams. One day the class teacher catches the respondent and giving a warning for that incident and make a written document for don't repeat these types of malpractices.

The respondent takes revenge for that he uses more techniques like make the bit as a reduced form, and also he came early in the class room and find his seating arrangements and written on the desk. The respondent explains that he got more support from the students. After the respondents 9th standard his friends are starts to using cigarettes and other substances. Most of the friends are rejected to used these types of substances. That time the respondent says to his friends that these types of drugs are harmful to the human body. The respondent didn't like to smoke. But he used at first in 9th standard for his friends. That time respondent facing lot of discomfort and cough more and more. Friends say that it is because of the respondent using cigarette at first time. So the cough gradually comes.

The respondent also says that he provide money to his friends when the friends have no money to buy cigarettes. And also says that there is a person provide different types of cigarettes and with many flavors. And the respondent tried all flavours of cigarette each and also says that he likes "mini wills". It is a type of cigarette. The respondent started his consumption of alcohol after he becomes dropout in 10th standard. Respondent consume alcohol because of his father. Respondent's father says that "if you are not study properly I will send you a boarding school". Respondent says that his brother did not get any types of scolding from his father or mother. Respondent is like a bad boy and his brother is a good boy. He is a little boy they consider him as a little kid. Respondent's brother got all things what he wishes. But the respondents didn't get anything. But respondent's mother likes him. So she gave money to buy tea and snacks. Sometimes the respondent gave this money to his friends.

At the beginning of high school examination, the respondent starts to think and doing mischievous things with his friends. The respondent using more techniques to write the bit or note as a reduced form with in the backside of the hall ticket and it was seen by the teacher and reported to the principal. The principal ordered to the invigilator to write copied on that answer paper. And make "D-BAR". The respondent cannot write other exams because of the hall ticket is taken as the evidence and give it to the university. Respondent is becomes voiceless. Respondent says that it was caught by the school faculty because of the angry. The class teacher didn't like the respondent and his friends. Teacher always says to the respondent like you are always make disturbances in the class. The last benchers must get out of the class while I am taking the class. After the incident the respondents friends are becomes no contact with him. But respondents intimate friends are still support the respondent. But the social stigma makes the respondent to stop the studying. The respondent doesn't like to go to school. The respondent likes to spend time with his friends and the respondent started to consume alcohol and other substances.

One day respondent's mother catch him with a packet of cigarettes. But that time the respondent denied that then the mother says that "I will tell to your father but the respondent explains that I will kill u and die myself" because I have nothing to lose except my friends. So the researcher knows about respondent's friend circle and it contains four boys and two girls. The respondent's companion is also a dropout but others are still studying. After the conversation between respondent and his mother, the mother doesn't like to talk with the respondents. So the respondent also did not talk to his mother. He always talks to the friends through the phone and now the respondent like to start a venture near to his house. The respondent also likes to start a mobile shop. So the respondent starts this new venture with the support of his friends. The share of his friends and the contributed money from the family helps to start this venture.

Case- D

The researcher finds the respondent through phone call. The mobile number and the other details are given by the respondent "D". The respondent's age is 21. The respondent's family is a small family consisting three members, father, mother and the respondent. The respondent is the only one girl child. And the respondent's father is a fisherman. The respondent's father died on the time of pregnancy of respondent's mother. Respondent's mother sells fish on the market. So she makes food on early morning and she went to fish market. Respondent's mother doesn't know about the academic things of her daughter. After 8 am the respondent reached school and spends lot of time with friends. Most of the friends are boys. But the respondent likes boyfriends than girlfriends.

The respondent explains herself as a bad girl for others but she is a good girl for her friends and her mother from her childhood. Respondent like to do what things boys can do. Respondent likes modeling so she colored her hair and go to school. The principal called her mother and gave an advice. But that time she hates the principal and other teachers who scold her. One day the class teacher told to cut the hair of the respondent. She bunk the class of this teacher and play with other boys in the ground. One day the respondent smoke in the girl's toilet and it becomes sensational news for the class as well as students. Respondent says that the incident was not done by alone. But the respondent didn't say anyone of her friend's name. So she cut the whole class and spends the time with boys near the sea. And then the respondent likes to go to the relatives home for drive vehicles. The respondent's relative's homes have vehicles like 2 wheelers, Honda Activa or scooter or bykes etc. But the respondent has no license and no vehicles. But the respondent came here to ask vehicles to drive. The relatives know about the respondent did not complete her high school education. The respondent discontinues her studies in the 8th standard. Respondent explains that she go to school only for the friends. After that the respondent came to open up that the friends spend lots of money and she cannot bear those expenses with girlfriends. So the respondent is comfortable with boyfriends. And they spend money a few for buying cigarettes and it share with friends. Due to the peer pressure she tried at first during the studies. So the respondent has only less interest to the studies. So the respondent cut the class and go to explore new places with his friends. And the respondent also consumes alcohol with her relatives. So they take alcohol once in a week. They inform to the respondent when they gathered to someone's home. The respondent says that she had a relationship with one of the person so the respondent likes to go there.

One day the mother hear that incident and beaten her. But that time the respondent left her home and she buy some cigarette and her friend bring alcohol and consume it. The respondent tries to eloping with her boyfriend. The respondent becomes sexually exploited and realize that her boyfriend did not like her. The respondents boyfriend likes only her body . But the partner of the respondent rejected it. This incident makes a behavior change with the respondent and she try to tell the incident with her mother. But the mother reacted rudely. The mother used to get out of the home and she closed the door. The mother thinks that the respondent will wait in front of the house. But after sometimes the respondent went to the seashore and come back to the house and try to cut the vain in front of the mother. The mother seen that incident through the window and she came out and bring her to hospital. The respondent gets a second life through that incident but the respondent hates the partner and found another guy. He is a drug dealer in the sea shore. After some days a guy proposes the respondent at first so the respondent fell in love with that person and realizes that after long years he is a drug dealer. So the respondent cannot break the relationship. But that relationship was not accepted by the mother... So the respondent take decision herself. And also the respondent says that "past is past.... either I mold him as a good person or I will become as him".

<u>CASE –E</u>

The researcher find a respondent "E" is referred by the school teacher. The respondent belongs to a small family consists of father, mother and the respondent. Father is an accountant and mother is a home nurse. From the childhood itself the respondent lives with high care and love. Because of the respondent is the only one child to his parents. The most be enjoyed in his life is his freedom from his parent. The respondent explains that family, and my parents that is his precious gifts in life. When the respondent was with them in that world and the respondent didn't spend much time with his friends. And also the respondent was young that he did not spend any time playing with his friends rather he used to spend much time in front of the book as his parents wish. Still he remember the faces that laughed at the respondent's for the same. They laughed because respondent was a boy and respondent used to spend time with parents. At that time his parent helped him to fly high in his education field and they supported him as they could. They did not give care to what society had to say.

The respondent started his schooling when he was 4 years old. There the respondent did not find many friends, but the respondent finds a girl as his best friend. The respondent likes her very much. So the respondent likes to spend much of the time with her. The respondent looked at the other boys in his class. They are like to spend most of their time with other boys in the playground. However his interest was somewhere else. The respondent likes to spend most of the time that girl. Because from where he got a positive attitude and rest of the time with his parents. Hence the researcher understood that the respondent's world is his parents and that girl. When he was seen spending time with that girl. His parents identified the importance that he is giving to that girl. As he grew up his attachment to that girl also increases. His achievements in the education field where also high. His performance being so, his parents did not dissuade him from anything. They only encouraged him to improve in every field.

As he grew older he becomes attached to that girl. He started spending most of the time with her in and out of the school. The relationship was started from the schooling of LKG to standard six. They share the same classroom, same bench, etc. suddenly her parents got job transfer to the some other places, her parents decided to change her school it had a great effect on him. His parents ask him to concentrate more in studies as he was nearing high school. But may be because of the distance he focused was on that girl. That focuses results in sleepless night's low marks in the academy. As days are passing he understood that more than a friend she has some other place in his heart.

When he was in high school he named that feeling towards her as love. But somewhere he felt the lack of support from his parents for his academics and all other activities. Respondent get much support from the family and also with the support of his other friends. He decided to express his feelings to that girl. One day suddenly he meets that girl and he expressed his feelings to her. The answer was negative. She told him about another boy. Who had more care and love to her than our respondent. That answer made him into trouble. Even though he got a negative reaction from this incident but he did not change his mind as well as his dreams. He realized to he was going on the right direction and one day she will accept his love. The most touching part of the respondent was then as he was waiting for happy news from her one day without any expectations. After a long time he heard the suicide news of that girl. When she came to know that she was in the track of cheating who she believes

balmily the first option she chooses was suicide. Her suicide breaks the respondent's life into two parts.

The respondent aims, dreams, and ambitions everything to came to an end suddenly. He had a feeling that without her his life is empty. Darkness was the only thing in his eyes. Lack of support from his parents and this suicide made him to stop his career in academics. The respondent says that "every success of a man behind a girl. But sometimes it takes our heart without killing us." He was spending much time with the local people near to his home. There was no one with him to guide in a positive direction or route. The people around the respondent's friends circle was namely alcohol or drug dealer. They started giving orientation to him about the usage of such substances. They thought him that the usages of such substances will help him to survive in this world alone. He believed in their words and decided to use drugs. Even though the respondent did not knows the origin of such things. He started spending much of his time in a dark room with the alcohol and drugs. As what his friends said it helps him to survive alone without depending or even considering about his family. The respondent first had a feeling that his girl is his life when he lost her , now the respondent feeling is his life is meant only for alcohol and drugs. With the help of parents and doctors the respondent live under the treatment in De-addiction Centre.

CHAPTER 5

CASE ANALYSIS

OVERVIEW

- Introduction
- Case Analysis
- Conclusion

5.1 INTRODUCTION

The researcher made a qualitative study on substance abuse among high school dropouts in Trivandrum district. This study adopted case study design as an in depth analysis of individual experience was needed. The cases are analysed on the basis of specific research questions of the study by means of identifying key themes in the discussions.

5.2 CASE ANALYSIS AND INTERPRETATION

The researcher made a qualitative study on substance abuse among high school dropouts in Trivandrum district. This study adopted case study design as an in depth analysis of individual experience was needed. In this chapter the researcher tries to analyse the data presented in the previous chapter by using thematic analysis .themes where identified by the researcher from the data on the basis of the specific objectives posed at the beginning of the study. The major themes identified are:

- 1. Socio- economic background
- 2. Reasons for dropout
- 3. Environmental factors
- 4. Nature and type of substance abuse

1. Socio- economic background

The respondents are generally from a mixed background. Two of them are from very poor social economic background. One from a rich family and one from a middle class family. The first case the father works abroad as a driver and mother is a house wife. Money is sent home by father in end of each month.. The second case the father is daily wage worker who is an alcoholic. They don't even pose a ration card and find it difficult to meet their daily requirements. The rest of the two cases are from comparatively well to do families with one from a rich family with father working with merchant navy. Depending on the socio economic the money that the respondent's posses for getting drugs and substance for abuse varies. The sources of money also vary from respondent to respondent. Even though the socio economic background is not correlated directly with drug and substance abuse it definitely has an influence on the behaviour like other factors.

2.Reasons for dropout

Dropping out from schools were one of the primary causes for all the respondents of the study to turn into substance abuse. According to Piaget Vydosky, Burner says that the students are attaining knowledge from the society. Dropping out resulted in lack of something for the respondents to direct their energy which was later directed to substance abuse by many other factors. The first respondent discontinued his study due to learning problem. Even though his family supported him at the initial stages they lost hope in him as he grew

older. This lack of interest of his immediate family members had a very negative impact over his levels of motivation. This lack of interest of parents was, mainly due to illiteracy and lack of awareness about learning disability. The lack of parental involvement is a problem that often leads to higher dropout rates, especially with high school students. Parents play an important role when it comes to high school attendance. High school dropouts often have parents who weren't engaged or concerned with their academic success. If a parent doesn't encourage her child to stay in school, show interest in classes and teachers, communicate with administration, or pay attention to homework assignments, the child might not see any reason to follow through with the coursework. Education of parents, their income, marital status, occupation and other related indicators significantly affect the education of children.

The second respondent had a broken family with father being an alcoholic. Lack of proper family atmosphere and control caused the respondent to get involved in substance abuse. Home environment is an important factor determining the education of students. A child's family and home environment have a strong impact on his/her language and literacy development and educational achievement (Cole, 2011). Lack of proper parental control was the reason behind the third respondent who is from a rich background to be a drug abuser. He was debarred from his school for attempting malpractices in examinations. He considered himself as a hero and practiced malpractices in examinations as an art in different forms. His mother had less control over him and continuous absence of father resulted in the lack of a significant figure of control. The forth respondent dropped out of school in connection with a love affair who was sexually abused by her boyfriend. Who later had another boyfriend who was a drug dealer. In this case also we can see that there is an absence of father in the family which may be one of the many reasons for the person facing emotional problems as. An adverse home environment can seriously have an effect on the studies of children. - She may experience a vacuum. In the last case who was a bright student had a one sided love affair

with a girl and the suicide of the girl resulted in losing interest in his studies and later dropping out.

3. Environmental factors

All the respondents turn into drug abuse after they discontinue their studies. Peer pressure was the pull factor for all of them. The peer groups of the respondents in general suggested alcohol and drug abuse as an alternative of emotional and psychological distress they faced. As social beings, adolescents are heavily influenced by values, beliefs, and social norms acquired through relationships with others. Adults and the peer group play an important role in teaching adolescents to use drugs. Popular conceptions of peer pressure to use drugs imply direct, coercive ploys designed to force drop outs to comply with group norms. In most cases, however, peer pressure to use drugs appears to be a subtle, indirect process of influence. Peer groups influence the social meaning of drug use by associating it with images of social recognition, independence, maturity, fun, and a variety of desirable outcomes. Thus, drug use often occurs in peer groups because adolescents reinforce each other's beliefs in these images. Peer mutual reinforcement of beliefs regarding the payoffs for drug use provides a powerful social basis for drug use

Lack of proper family atmosphere and control by immediate family members like parents especially father is also one of the major reasons that led the respondents to be involved in alcohol and drug abuse. There exists no proper monitoring and control of the sources of the money and the money spend by the respondents. The last two respondents cheated on their parents for getting money for substance abuse while the first three cases relayed on other sources. Absence of guidance at the time of dropping out is one of the major factors as far as the respondents are concerned because the vacuum they experienced then was filled and directed by peer groups towards drug abuse.

4. Nature and type of substances.

All of the respondents were used alcohol and were chain smokers. They primarily use cocaine for gaining pleasure.panmasala, shamboo, cool, cannabis were the major local brands used by the respondents.

Herbal or vegetable marijuana is, by a small margin, the commonest form of the drug in use worldwide. This is prepared by drying and chopping the leaves of the marijuana plant into a coarse cut tobacco-like mixture.Cocaine is a central nervous system stimulant that has gained great popularity in a variety of drug forms. Cocaine is a pure white crystalline powder. The crystals are very small and even and sparkle when exposed to the light. It is usually about 85% pure at the end of the manufacturing process and it is in this form that it enters different parts of the world.

There are several street names for cocaine: coke, snow, bernice, big c, bombita etc. Specific psychoactive drugs are more available in some communities than in others. Alcohol, tobacco and marijuana are available, to some degree, in virtually every Community and worldwide. The quality, cost, and ease of availability, however, may vary widely. Other drugs, including cocaine, crack, and heroin, are available in some communities and unavailable in others. Obviously an adolescent must have access to a drug before becoming a user of it. The more available the drug is, the easier it is for an adolescent to become a user. Substance abuse is a passive activity. Individuals take pills, powder or liquids and wait for the desired effect, which is an alteration of their consciousness. In some cases, such as freebasing cocaine or injecting drugs, the desired effect is almost instantaneous. Too frequently, feelings of boredom, sadness, etc. are not actively worked through; instead, the individual passively changes what he/she feels by using substances

CHAPTER 6

RESEARCH FINDINGS, SUGGESTIONS AND CONCLUSIONS

Overview		
Introduction		
Findings		
Suggestions		
Conclusion		

INTRODUCTION

Cases were analyse thematically based on the research questions. Based on the analysis researcher reached the following conclusion and suggestions.

Findings

- All the respondents had a feeling of loneliness and isolation that they faced after being a dropout.
- Lack of proper care and attention from someone significant like parents and teachers were visibly one among the reasons for high school dropouts being drug or substance abusers.
- Peers had great influence on all of them. The change of peer circle after being a drop out was a significant reason for the drop outs to get involved in drug and substance

abuse. This peer group which all seems to get involved with is generally unmonitored as it is outside the circle of school.

• Lack of proper guidance and absence of role models were one of the major reasons for high school dropouts foe being involved in alcohol and drug abuse. Peers occupy this vaccum experienced by them and these 'new guides' direct them to substance and drug abuse as an alternative.

Suggestions

- Teachers has to give orientation about dealing with deviant behaviour of children
- Schools has to resort to other new mechanisms which is more child friendly
- Steps have to taken in the form of serious intervention to re integrate mild and moderate drug abusers to general society
- Parents has to be given awareness about the general behaviour patterns of youngsters
- Committed teachers may be selected and trained to identify high school students needs and direct them properly
- The counseling center in each school should give sufficient opportunities to parental counseling as well
- Action oriented programmes aganist substance abuse should be made an invariable component of the activities of School Health Club.
- Provide regular periodical in-service training to all the teachers of Kerala on Adolescence Education.

Conclusion

After all the research that has been accomplished, the problem of children dropping out of school still exists. It still exists today because of the many factors that contribute to school dropouts. Factors such as family structure, income, substance use, residential location, and motivation are all factors that contribute to the dropout rate. The major reasons that lead to high school drop outs in to drug abuse is the lack of proper coordination between psychological and emotional status.

The respondents failed to find a proper alternative to deal with the tension that the respondents experienced either due to debarring or love failure. This was due to lack of guidance from family or due to the absence of role models. This vacuum was filled by the peer groups which had significant influence over the respondents. The peers suggested drug or substance abuse as an alternative to cope with their distress or imbalanced experience. The problem of substance abuse in school has increased worldwide. There is need for incorporating substance abuse prevention into the school's subject matter in all grades.

In this the researcher has explored the underlying factors that contribute towards substance abuse among highschool dropouts. The study has indicated the incidence, effects of substance abuse and its relation to dropout. The study revealed alcohol and marijuana as the mostly abused substances. The relationship between alcohol, cocaine, marijuana and drop out is also indicated in the study. It has also established that most of the learners that abuse substances started during the adolescent stage. However, easy access of the learners to substances in their communities may hinder the eradication of substance abuse amongst teenagers; therefore, this needs to be addressed. Moreover, since some of the learners have failed on their own to stop using substances, there is a need to develop a counselling programme in each school to help refer such learners to rehabilitation centres, and to provide proper support for them.

BIBLIOGRAPHY

- Aijazuddin Ahmad (1996) : "Muslims in India", Inter India Publications, Hamdard Education Society, New Delhi.
- Amayo, G. N. (1994). International Institute for prevention of Drug Abuse: A Handbook for Primary and Secondary Teachers' Guidelines in Drug Dependence preventive Education. Nairobi: Lama Limited Printers.
- Elizabeth, B. R.; Susan, L. D, & Suman, A. R. (2003). Preventing Drug Use among children and adolescents .A research –Based Guide for parents, Education and community leaders Second Edition. New York. United States of America.
- Goldscmidt, P. & Wang. J, (1999): *When can School Affect Dropout Behavior*, American Educational Research Journal, 36, 715-738.
- Imbosa, (2002). An Investigation into Strategies Used in Addressing Drug Abuse Problems. A Case Study of Nairobi Provincial Boys' Secondary Schools. M.E.D Research Project Report. Kenyatta University.
- Kaguthi, J. (2004). Youth in Peril: Alcohol and Drug Abuse in Kenya. Nairobi: Baseline Survey Report.
- Laird, J., Kienzl, G., DeBell, M., & Chapman, C. (2007). *Dropout rates in the United States:* 2005. *Compendium report*. Washington, DC: National Center for Education Statistics.
- M. Agarwal, A. Nischal, A. Agarwal, J. Verma and S. Dhanasekaran, "Substance Abuse in Children and Adolescents in India," J. Indian Assoc. Child Adolescence, Mental Health, vol 9(3), 2013, pp.62-79.
- Melville, K. (2006). *The school dropout crisis: Why one-third of all high school students don't graduate*. Charlottesville, VA: Pew Partnership for Civic Change.

- Mensch, B. S., & Kandel, D. B. (1988). Dropping out of high school and drug involvement. Sociology of Education, 61(2), 95-113. doi:10.2307/2112267
- Moberg, D. P., & Finch, A. J. (2007). Recovery high schools: A descriptive study of school programs and students. Journal of Groups in Addiction and Recovery, 2(2-4), 128-161. doi:10.1080/15560350802081314
- Ngesu, I. M, Ndiku, J. & Masese, S. (2008). Drug Dependence and Abuse in Kenya Secondary Schools; Strategies for Intervention. Educational Research and Review. Vol. (10).
- R. Pandya and S. Bora (1997): "Study of Factors Causing School Drop-outs", Journal of Indian Education, November, 1997, pp. 32-37.
- Rumberger, R. W. (1987). *High school dropouts: A review of issues and evidence. Review of Educational Research*, 57(2), 101-121. doi:10.3102/00346543057002101
- Rumberger, R. W., & Lim, S. (2008). *Why students drop out of school: A review of 25 years of research*. Santa Barbara, CA: University of California Santa Barbara.
- Sanci, L., et al. 2002. "Drug Education Approaches in Secondary Schools." Prevention Research Evaluation Report, Number. Drug Info Clearinghouse, Australian Drug Foundation. Melbourne: Australian Drug Foundation. Available from: http://www.druginfo.adf.org.au/downloads/Prevention Research Quarterly/REP_ No3 02Nov Drug education.pdf
- Siringi & Waihenya (2003). *Alarm over Drugs. Kenya*. In Daily Nation Nairobi. Nation Media group.

Wall, A. E., and Patricia L. Kohl. 2007. "Substance Use in Maltreated Youth: Findings from the National Survey of Child and Adolescent Well-Being." Child Maltreatment, 12(1): 20-30.