

Original Research Article

PREVALENCE AND PATTERN OF SUBSTANCE ABUSE AMONG URBAN SLUM DWELLERS OF RANCHI

Syed Ajaz Hashmi¹, Ashib Parvez², Mohammed Bhilal Babu³, Vidya Sagar⁴, Devesh Kumar⁵

¹Assistant Professor, Department of Community Medicine, F.H. Medical College & Hospital, Etmadpur, Agra, Uttar Pradesh, India

²Associate Professor, Department of Community Medicine, F.H. Medical College & Hospital, Etmadpur, Agra, Uttar Pradesh, India

³Assistant Professor, Department of Anatomy, F.H. Medical College & Hospital, Etmadpur, Agra, Uttar Pradesh, India

⁴Professor, Department of Community Medicine, RIMS, Ranchi, Jharkhand, India

⁵Associate Professor, Department of Community Medicine, RIMS, Ranchi, Jharkhand, India

Received : 20/03/2025
Received in revised form : 17/05/2025
Accepted : 04/06/2025

Corresponding Author:

Dr. Mohammed Bhilal Babu,
Assistant Professor, Department of
Anatomy, F.H. Medical College &
Hospital, Etmadpur, Agra, Uttar
Pradesh, India
Email: dr_beo@yahoo.co.in

DOI: 10.70034/ijmedph.2025.2.342

Source of Support: Nil,
Conflict of Interest: None declared

Int J Med Pub Health
2025; 15 (2); 1912-1915

ABSTRACT

Background: The World Health Organization (WHO) defines substance abuse as “Persistent or sporadic use of a drug inconsistent with or unrelated to acceptable medical practice”. India is not free from substance-abusing individuals, especially adolescents, and such cases are growing each day. The world sees an increasing trend in drug abuse among young people under the age of 30. Trends show that 320 million young people aged between 15-29 years are dying from alcohol-related causes, resulting in 9% of all the deaths in that age group. The objective is to estimate the overall prevalence of substance abuse and to identify the pattern of substance abuse among slum dwellers of Ranchi between the 10-30 years age group.

Materials and Methods: A total of 72 substance abusers were identified using snowball sampling technique and interviewed for estimating the prevalence and pattern of substance abuse.

Results: The overall prevalence of substance abuse in the study population was observed as 9.6%. Following pattern was observed in study subjects, 100% were tobacco users, 97.2% were cannabis users, 90.3% were prescription drugs users, 81.9% were opioids users, 75% were alcoholic beverages users and 66.7% were sedatives users.

Conclusion: There is an increasing trend of polysubstance users. There is a rising trend in cannabis, opioids, and prescription drugs usage.

Keywords: Substance abuse, Slum dwellers, Tobacco, Cannabis, Prescription drugs.

INTRODUCTION

The World Health Organization (WHO) defines substance abuse as “Persistent or sporadic use of a drug inconsistent with or unrelated to acceptable medical practice”.^[1] Both developed and developing nations face an increasing public health challenge in the form of substance abuse.^[2,3] India is not free from substance-abusing individuals, especially adolescents, and such cases are growing each day.^[4] Students are known for abusing substances such as tobacco, alcohol, cannabis, and various allopathic drugs despite their known ill effects.^[5] Consumption of addictive substances has been an ancient practice worldwide and in India for many centuries.^[6,7] The world sees an increasing trend in drug abuse among young people under the age of 30. Trends show that 320 million young people aged between 15-29 years

are dying from alcohol-related causes, resulting in 9% of all the deaths in that age group.^[8]

Slums are economically backward areas with socioeconomic problems. Substance abuse might be different in the slum population and might be related to these problems. There is limited Ranchi-specific data about the prevalence and pattern of substance abuse. Hence, we intended to estimate the overall prevalence of substance abuse and identify the pattern of substance abuse in slum dwellers of Ranchi between the 10-30 years age group.

Objectives

1. To estimate the overall prevalence of substance abuse among slum dwellers of Ranchi between the 10-30 years age group.

- To identify the pattern of substance abuse among slum dwellers of Ranchi between the 10-30 years age group.

MATERIALS AND METHODS

Study Design: This study is a descriptive observational, cross-sectional, community-based study. We adopted a multi-method approach comprising both quantitative and qualitative research methods. Key informant interview of the subjects was used to fulfil the planned objectives.

Study Population: Male individuals between the age group 10-30 Years residing in the selected slum areas of Ranchi.

Inclusion Criteria

- Male slum dwellers of the area under study.
- Between the age group 10-30 years
- Indulged in any of the substance abuse.
- Persons/guardians giving their consent/assent.

Sampling Technique: Three slums from the Ranchi Municipal Corporation, listed slums were randomly selected, and initial meetings were held with local notables of these slums to explain the purpose of the study. Initial potential research participants were identified and interviewed. We used the snowball technique (existing study participants recruit future participants from among their acquaintances) to pick subsequent research participants. This process continued till we reached saturation in the study area. The ultimate sample size of the study after exclusions was 72 subjects.

Overall prevalence Calculation: According to the United Nations Population Database, the Youth Population share in India for 2020 is 33.84% (9). Therefore, the study area's youth population was around 1499, and the male youth population was 750, which was the population at risk.

Study Period: Between June 2018 and November 2020. Data collection became prolonged due to COVID-19 restrictions.

Data Collection: We used a semi-structured, pretested questionnaire involving Alcohol, smoking, and substance involvement screening test (ASSIST) Version 3.0. ASSIST contains eight questions usable

across a variety of cultures to screen for the following substances:

- Tobacco products
- Alcohol
- Cannabis
- Cocaine
- Amphetamine-type stimulants (ATS)
- Sedatives and sleeping pills
- Hallucinogens
- Inhalants
- Opioids
- Other drugs

The questionnaire was pretested amongst 5 participants, and necessary modifications were made accordingly.

Ethical Consideration: The Institutional Ethical Committee of RIMS, Ranchi, issued ethical clearance for this study.

Data Management: MS Excel was used for data management.

RESULTS

$$\text{Prevalence} = \frac{\text{Total number of cases} \times 100}{\text{Population at risk}}$$

$$\frac{72 \times 100}{750} = 9.6\%$$

The overall prevalence of substance abuse in the study population came out to be 9.6%, out of which 98.6% of the subjects were polysubstance users (at least three different substances).

The pattern of the different substance abuse was observed as follows [Table 1 and Figure 1].

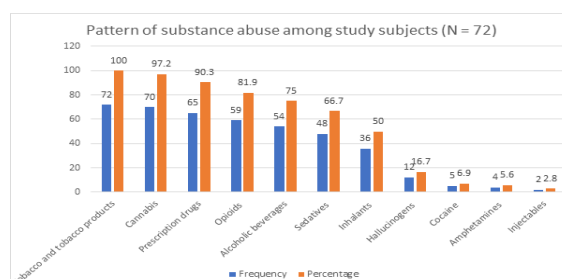


Figure 1 Pattern of substance abuse among the study subjects (N=72).

Table 1: Pattern of substance abuse among the study subjects (N=72).

Name of substances	Frequency (N=72)	Percentage (%)
Tobacco and tobacco products	72	100
Cannabis	70	97.2
Prescription drugs	65	90.3
Opioids	59	81.9
Alcoholic beverages	54	75
Sedatives	48	66.7
Inhalants	36	50
Hallucinogens	12	16.7
Cocaine	5	6.9
Amphetamines	4	5.6

DISCUSSION

The overall prevalence of substance abuse: The overall prevalence of substance abuse was 9.6%,

which is higher than the Global average of 5.6%.^[10] Our study shows a higher prevalence rate than some Indian studies such as Awasthi et al. 4.65%,^[11] and Chavan et al 6.88%.^[12] Higher prevalence rate than

our study was recorded by many Indian studies such as Thacore et al. 18.5%,^[13] Dadwani et al. 18.86%,^[14] Meena et al. 19.78%,^[15] Dube et al. 22.8%,^[16] Jena et al. 28.8%.^[17] This might be due to the low number of subjects available owing to the COVID-19 Pandemic.

The pattern of substance abuse: 90.3% of the subjects had abused prescription drugs which is a trend that needs attention. The prescription drugs mostly abused were alprazolam, nitrazepam, tramadol, and cough syrups. Cannabis was used by 97.2% of subjects which is far more than in other Indian studies such as Ashtankar HJ et al. 7.2%,^[18] Ghulam R et al. 8.9%,^[19] Basu et al.,^[20] 10.1% and Sau M et al. 43%.^[21] This shows that there is an increasing trend of using cannabis or its products such as Ganja/weed and Charas. Opioids and opiates were abused by 81.9% of the study population, which is more than the findings of Awasthi et al. 1.53%,^[22] Dadwani et al. 3.56%,^[14] Ghulam R et al. 4.9%,^[19] Sau M et al.,^[21] 29.6% and Maaruf et al. 79%(23).^[23] 75% of the study population used alcoholic beverages, which is higher than the Indian NFHS 4 data 29.5%,^[24] Sau M et al. 38.3%,^[21] Maaruf et al. 41%,^[23] Ghulam R et al.,^[19] 46.5% and Ashtankar HJ et al. 70.35%.^[18]

66.7% of the study population used sedatives. Sedative abuse has been very high in our study compared to that of the National Survey by NDDTC 2019 1.08%,^[25] Basu et al 7%,^[26] and Ghulam R et al. 2%.^[19]

50% of the study population used inhalants which is also higher than the studies done by the NDDTC National Survey 2019 0.7%,^[25] and Ghulam R et al. 1%.^[19] Hallucinogens and amphetamines were used by 16.7% and 5.6% of the study subjects respectively. 100% of the study population were using tobacco products which is similar to the findings of Sau M et al.^[21] The higher frequency and prevalence of tobacco products are because of their legality and attitude towards it that the people don't consider it to be part of substance abuse.

This study shows a clear pattern of increased prevalence of cannabis, opioids, sedatives, and tobacco abuse than most of the other studies. This may be a growing trend in Ranchi. Moreover, most of them are polysubstance users.

CONCLUSION

From the above study, we have found that

- There is an increasing trend of polysubstance users.
- There is a rising trend of cannabis, opioids, and prescription drugs.

REFERENCES

1. WHO (2003) Expert Committee on Drug Dependence, 33rd Report. Geneva: WHO Technical Report Series 915.
2. Lo TW, Yeung JW, Tam CH. Substance abuse and public health: A multilevel perspective and multiple responses.

- International journal of environmental research and public health. 2020 Apr;17(7):2610.
3. McLellan AT. Substance misuse and substance use disorders: why do they matter in healthcare?. Transactions of the American Clinical and Climatological Association. 2017;128:112.
4. Ganguly K. Pattern and process of drug and alcohol use in India. ICMR Bull. 2008 Jan;38(1-3):1-8.
5. Chen CY, Lin KM. Health consequences of illegal drug use. Current opinion in psychiatry. 2009 May 1;22(3):287-92.
6. Somasundaram O, Raghavan DV, Murthy AGT. Drinking habits in ancient India. Indian J Psychiatry 2016;58:93-6.
7. Crocq MA. Historical and cultural aspects of man's relationship with addictive drugs. Dialogues Clin Neurosci 2007;9:355-61.
8. World Health Organization. Action needed to reduce health impact of harmful alcohol use. Cent Eur J Public Health. 2011; 19(1):41-45.
9. Andrew B. et al. Guide to Drug Abuse Epidemiology Department of Mental Health and Substance Dependence Noncommunicable Diseases and Mental Health Cluster World Health Organization. WHO/MSD/MSB/00.3. 2000.
10. Jean-Luc Lemahieu. United Nations Office on Drug and Crime. World drug report 2018. Executive Summary Conclusions and Policy Implications.
11. Avasthi A, Basu D, Subodh BN, Gupta PK, Malhotra N, Rani P, Sharma S. Pattern and prevalence of substance use and dependence in the Union Territory of Chandigarh: Results of a rapid assessment survey. Indian journal of psychiatry. 2017 Jul 1;59(3):284-92.
12. Chavan BS, Arun P, Bhargava R, Singh GP. Prevalence of alcohol and drug dependence in rural and slum population of Chandigarh: A community survey. Indian journal of Psychiatry. 2007 Jan 1;49(1):44-8.
13. Thacore VR. Drug-abuse in India with special reference to Lucknow. Indian Journal of Psychiatry. 1972 Jul 1;14(3):257-61.
14. Dadwani RS, Thomas T. Prevalence of substance abuse: a community based study. Int J Community Med Public Health [Internet]. 2017 Feb. 1 [cited 2025 May 24];3(3):647-50. Available from: <https://www.ijcmph.com/index.php/ijcmph/article/view/770>
15. Meena, Khanna P, Vohra AK, Rajput R. Prevalence and pattern of alcohol and substance abuse in urban areas of Rohtak city. Indian journal of psychiatry. 2002 Oct 1;44(4):348-52.
16. Dube KC, Handa SK. Drug use in health and mental illness in an Indian population. The British Journal of Psychiatry. 1971 Mar;118(544):345-6.
17. Jena R, Shukla TR, Pal H. Drug use in a rural community in Bihar: Some psychosocial correlates. Indian journal of Psychiatry. 1996 Jan 1;38(1):43-6.
18. Ashtankar HJ, Talapalliwar MR. Felt need and treatment-seeking barriers among substance abusers in urban slum area in Central India. Indian Journal of Psychological Medicine. 2017 Jul;39(4):436-40.
19. Ghulam R, Verma K, Sharma P, Razdan M, Razdan RA. Drug abuse in slum population. Indian journal of psychiatry. 2016 Jan 1;58(1):83-6.
20. Basu D, Aggarwal M, Das PP, Mattoo SK, Kulhara P, Varma VK. Changing pattern of substance abuse in patients attending a de-addiction centre in North India (1978-2008). Indian J Med Res 2012;135:830-6.
21. Sau M, Mukherjee A, Manna N, Sanyal S. Sociodemographic and substance use correlates of repeated relapse among patients presenting for relapse treatment at an addiction treatment center in Kolkata, India. African health sciences. 2013 Sep 6;13(3):791-9.
22. Avasthi A, Basu D, Subodh BN, Gupta PK, Goyal BL, Sidhu BS, Gargi PD, Sharma A, Ghosh A. Epidemiology of dependence on illicit substances, with a special focus on opioid dependence, in the State of Punjab, India: Results from two different yet complementary survey methods. Asian Journal of Psychiatry. 2019 Jan 1;39:70-9.
23. Maruf MM, Khan MZ, Jahan N. Pattern of substance use: study in a de-addiction clinic. Oman medical journal. 2016 Sep;31(5):327.

24. International Institute for Population Sciences (IIPS) and ICF. 2017.National Family Health Survey (NFHS-4), 2015-16: India. Mumbai: IIPS:370.
25. Ambekar A, Agrawal A, Rao R, Mishra AK, Khandelwal SK, Chadda RK. on behalf of the group of investigators for the National Survey on Extent and Pattern of Substance Use in India. Magnitude of Substance Use in India. New Delhi: Ministry of Social Justice and Empowerment, Government of India. 2019:23
26. Basu D, Aggarwal M, Das PP, Mattoo SK, Kulhara P, Varma VK. Changing pattern of substance abuse in patients attending a de-addiction centre in north India (1978-2008). Indian Journal of Medical Research. 2012 Jun 1;135(6):830-6.