

## Study of Substance Abuse by Street Children in Jaipur City, Rajasthan

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### Abstract

**Objective:** Street children are a highly mobile population and difficult to reach. They are recognized to be vulnerable to substance, physical and sexual abuse. Most of the studies on street children were conducted either in observation homes or via surveys, our objective was to conduct a study among street children of Jaipur City to assess substance abuse and the factors associated with them. **Material and method:** The present study was observation and the population consisted of children between 5-15 years of age living on the streets of Jaipur city. **Result:** In the study population three most common reasons observed for starting substance use were peer pressure, increase in confidence, and out of curiosity i.e. 31.5%, 21.2% and 19.6% respectively. Rest 10.3%, 9.8% and 4.9% were using them to feel elated, to forget sorrows and to decrease hunger respectively. **Conclusion:** In the present study, the overall prevalence of substance use was 46.0% & majority of them (86.4%) had family history of substance use. The most critical age for using substance was 9-13years. More than half of the children had habit of smoking cigarette/bidi (58.2%) and chewing tobacco (56.5%).

**Key words:** Prevalence of Drug Abuse, Factors, Drug of Abuse, Children, India

### INTRODUCTION

United Nations stresses the right of every child to have opportunities for developing physically, mentally and socially in conditions of freedom and dignity within home and out sides. Hence, the problems faced by these children should be viewed as a human rights issue as exploitation on the street and exposure to violence infringes on their human rights. It is important that the special problems of this group are recognized so that the state can target its resources on areas most critical, thereby helping these youth in making a successful transition into adulthood.<sup>[1]</sup>

The official definition of street children in Mali “Is regarded as “street-children”, all minors, with urban residence, less than 18 yrs of age, who spends all the time in the street, work or not, and which maintains little or no relationship with his/her parents, tutor or the person in charge of his/her guard or protection. The street remains the exclusive and permanent framework of life of this child and the source of his/her means of existence. The street means unspecified place other than a family or institution of reception, such public or private buildings, squares, pavements.<sup>[2]</sup>



Researcher shows in their study on drug abuse among street children in Bangalore found that, of the 281 children assessed for drug use 70% were drug users and most of the children (24.4%) were living on streets due to economical reasons.<sup>[3]</sup> Another researcher also reported that around 68.7% subjects reported substance use in their family, among whom 86.1% reported substance used by the father. Among the children interviewed, 57.4% had indulged in substance used before coming to observation home.<sup>[4]</sup>

National Survey on Extent, Pattern and Trends of Drug abuse in India (2004) conducted by the Centre in collaboration with United Nations Office on Drugs and Crime estimated 7.5 crore Indians are drug addicts and the number is going up significantly, spreading to semi-urban and backward areas. The current prevalence rates within the age group of 12-18 years were- Alcohol (21.4%), Cannabis (3%), Opiates (0.7%) and any illicit drug (3.6%). The survey indicated a high concentration of drug addiction in certain social segments and high-risk groups, such as, commercial sex workers, transportation workers and street children.<sup>[5]</sup>

Street children are a highly mobile population and difficult to reach. They are recognized to be vulnerable to substance, physical and sexual abuse.<sup>[6]</sup> Most of the studies on street children were conducted either in observation homes or via surveys. Our objective was to conduct a study among street children of Jaipur City to assess substance abuse and the factors associated with them.

## MATERIAL AND METHODS

**Study Design:** The present study was observational study and the Study period was conducted from June 2013 to June 2014. **Sample size:** Accepting the prevalence of Substance use i.e. 57.4% among street children with allowable error of 5% and confidence interval of 95%, the sample size to be achieved was 375.<sup>[4]</sup> However, for the study purpose it was rounded off to 400 street children of 5-15 years. **Study Area:** The study was conducted in "JAIPUR CITY". **Study population:** The study population consisted of children between 5-15 years of age living on the streets of Jaipur city. **Inclusion Criteria:** All Street children between 5-15 years of age who agreed to participate in the study and were living in Jaipur city during the study period. **Exclusion criteria:** Children who were not co-operative, Children coming for second time within the study period and Children >15 years. **Methodology:** The study was conducted in Jaipur city. It was an observational study. The sample size was calculated to be 400. Sampling was carried out by using respondent driven sampling (RDS) technique for hard to reach population method.<sup>[7]</sup> **Analysis:** The generated data was entered onto

**Table 1: Distribution of street children using substance according to family history of substance use.**

Substance use in the family	Total	Children using substance		% Prevalence
		No	%	
Yes	228	159	86.4	69.7
No	172	25	13.6	14.5
Total	400	184	100.0	46.0

**Table 2: Distribution of Street Children According to Status of Substance Use.**

Substance use status	Number	Percentage
Yes	184	46.0
No	216	54.0
Total	400	100.0

**Table 3: Distribution of Street Children According to Reason for Start Using Substances**

Reasons	Number	Percentage
Out of curiosity	36	19.6
To forget sorrows	18	9.8
Decrease hunger	9	4.9
Feel happy/related	19	10.3
Increase confidence	39	21.2
Peer pressure	58	31.5
Others	5	2.7
Total	184	100.0

a computerized Excel (Microsoft Excel 2007) spread sheet and was analyzed using SPSS (Statistical Package for Social Sciences) version 20.0. The study protocol was approved by Department of Community Medicine, NIMS Medical College, NIMS University, Jaipur, India.

## RESULTS AND DISCUSSION

The present study has brought out that the substance use among the street children was significantly higher ( $p < 0.001$ ) where one or more family members were using it i.e. 86.4%, than those where there was no family history of it i.e. 13.6% (Table 1). Even the prevalence of substance use was also seen to be high i.e. 69.7% in those street children who had positive family history of substance use. Pagare D., *et al.*<sup>[4]</sup> in her study on risk factors of substance use among street children in Delhi had found that a total of 68.7% subjects reported substance use in their family, among whom 86% reported substance use by the father. However, Tiwari P.<sup>[8]</sup> in her study in Delhi observation home found that there

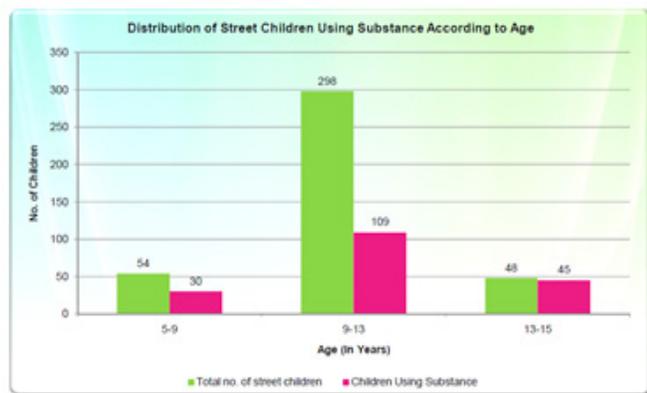


Figure 1: Distribution of children using substances according to age.

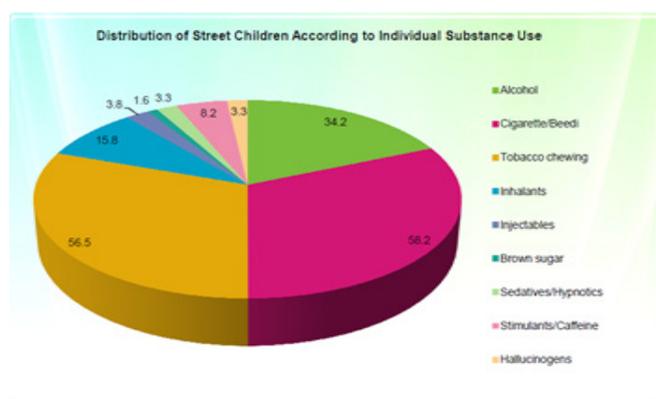


Figure 2: Distribution of children using substances according to individual substance abuse.

was no association between parental substance use and the use in children. This may be because the study was carried out in older children lodged in an observational home by the police.

In our study 46.0% of the street children were using substances whereas 54.0% were not using any substances (Table 2). The study findings tally with the findings of the other studies. Tiwari *et al.*,<sup>[8]</sup> in her study of 400 runaway boys at an observational home in Delhi also found more than 50% boys had used one or more substance while out on the streets. Similar observations had also been reported by others.<sup>[3-8,9]</sup> The present study has revealed that maximum number of street children who were using substances were from 9 -13 years followed by 13 -15 years i.e. 59.2% and 24.5% respectively ( $p < .001$ ) while the prevalence of using substance was highest i.e. 93.8% in street children aged 13 -15 years followed by 55.6% in street children aged 5-9 years (Figure 1). Similar findings were reported by others where they observed that with the increase in the age prevalence of substance use also increased amongst street children.<sup>[10,11]</sup>

The present study has revealed that out of 184 children who were using substances, more than half of them had a habit of smoking cigarette/ beedi and chewing tobacco i.e. 58.2% and 56.5% respectively (Figure 2). Alcohol, inhalant and stimulant /caffeine were also used by 34.2%, 15.8% and 8.2% children respectively. However, there were 18.7% street children who were using brown sugar, injectables and sedatives. The mode of consumption of tobacco in the current study was mostly in the form of smoking (85.5%). Similar findings by other researchers reported where they observed that consumption of tobacco in the form of smoking was the commonest and alcohol was next.<sup>[4-6-10]</sup> Other researcher was found that current use of tobacco, alcohol, and cannabis were found to be 12.7%, 5.3% and 0.2% respectively. Similar results showed by Tiwari *et al.*,<sup>[8]</sup> in her study also observed that only few children were using Bhang (5.5%), Ganja (2.1%), Charas (1.8%) and intravenous drugs (1%) which tallies well with the present study.

In the study population three most common reasons observed for starting substance use were peer pressure, increase in confidence, and out of curiosity i.e. 31.5%, 21.2% and 19.6% respectively (Table 3). Rest 10.3%, 9.8% and 4.9% were using them to feel elated, to forgot sorrows and to decrease hunger respectively. Kumar *et al.*<sup>[11]</sup> also observed that the main sources of initiation of drug use were peers (84.0%) and self (13.1%).

## CONCLUSION

In the present study the overall prevalence of substance use was 46% and majority of them had family history of substance use. The most critical age for using substance was 9-13 years. More than half of the children had habit of smoking cigarette/bidi and chewing tobacco. Peer pressure, increase in confidence and out of curiosity were the most common reasons for starting the substance use.

## FUNDING

Nil

## COMPETING INTERESTS

Nil

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