

## **Drug and Alcohol Abuse among Women and its Effect on Social and Health Issues**

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### **Abstract**

*Drug and alcohol abuse are the serious social and health issues which are engulfing the youth all over the world. Drug abuse is a global phenomenon. The use of drugs and alcohol is a problem which adversely affect all sections of Naga society. Drug abuse and alcoholism have affected the social, physical, economic, spiritual, psychological and cultural aspects of the people in Nagaland. They have affected individuals, families and the society at large. It is not only men who abuse drug and alcohol, but also women and they go through varied social and health implications. The paper depicts the main three factors for women taking to drugs and alcohol in Nagaland such as peer pressure, frustration and family problem. The article shows that the young people of Nagaland have become the most vulnerable group and easy victims of drug and alcohol abuse. Drug abuse and alcoholism are causes of social evils such as cheating, prostitution, suicide, and killing. It is also evident from the study that women drug users and alcoholics have been stigmatized on the following grounds: they are looked down upon by society, restricted from employment, neglected by family members and friends, and scolded by their parents. Drug users and alcoholics contract health problems like T.B., Hepatitis, Liver infection, HIV/AIDS, premature death, etc. It is very essential to suggest and recommend awareness programmes on drug and alcohol abuse such as organizing seminars and workshops, establishing good hospitals, and extending family and societal support to the substance abusers and alcoholics. This paper attempts to examine the social and health problems of women suffering from drug/alcohol abuse in reference to the Kohima, Dimapur and Phek districts of Nagaland.*

## **Introduction**

Nagaland is a hill state situated in the North Eastern region of India, land-locked by Myanmar on the East, Assam on the West and Manipur in the South. Nagaland is a tiny state, but the epidemic of drug and alcohol abuse in the state is huge and need serious attention. The use of drugs and alcohol has adversely affected the Naga society - social, physical, economic, spiritual, psychological and cultural. It is one of the most widespread and burning social problems in the state. This problem is detrimental to individuals and to the society. This paper is an investigation into the social and health problems of women who are victims of drug and alcohol abuse in Nagaland.

## **Drug and Alcohol Abuse**

The term 'drug' simply refers to a chemical compound used for the treatment of diseases. 'Drug abuse' is the use of illicit drugs or misuse of legitimate drugs resulting in physical and/or psychological harm. Alcohol abuse is the intentional overuse of alcohol, *i.e.*, to the point of drunkenness. This includes occasional and celebratory over-drinking. Alcohol is used by some as a normal, pleasant and sociable activity, while others take it as a spur which enables them to work. Alcohol is a colourless volatile flammable spirit, especially as intoxicant in wine, beer and spirit. Alcoholism is a condition in which an individual has lost control over his/her alcohol intake and consequently he/she is unable to refrain from it once he/she begins. 'Alcoholism' implies a state of 'periodic' or chronic intoxication.

Addiction is a chronic, often relapsing brain disease that causes compulsive drug seeking and use despite its harmful consequences to the individual that is addicted and to those around them. Drug addiction is a brain disease because the use of drugs leads to changes in the structure and function of the brain. Although it is true that for most people the initial decision to take drugs is voluntary, over time the changes in the brain caused by repeated drug abuse can affect a person's self-control and ability to make sound decisions, and at the same time send intense impulses to take drugs. It is because of these changes in the brain that it is so challenging for an addict to stop abusing drugs (Jha, 2009).

Sain (1991) has shown that ethyl alcohol, popularly known as alcohol, is the third socially accepted drug. He states that alcohol is absorbed into the blood-stream via the stomach and takes effect within 5-10 minutes. Effects vary according to individual health, weight and sex; but, as a rough measure, three single whiskies drunk in one hour might result in 0.05% alcohol content rise in the blood. This lift spirits and lessen inhibitions (a single whisky is equivalent to one glass of wine or half a pint of beer). Women get drunk more easily than men because they have less water per body weight. They also stay drunk longer if they are on the pills; but get drunk slower during menstruation. Hang-overs are actually the body's response of shock at being subjected to a substantial dose of a poisonous substance.

### **Objectives of the Study**

1. To examine the social issues among women drug/alcohol users.
2. To analyse the health issues among the women drug/alcohol users.
3. To provide suggestions and recommendations on the hazards of drug and alcohol abuse.

### **Methodology**

The paper is based on primary data collected from 50 respondents from Kohima, Dimapur and Phek districts of Nagaland. These 50 female drug/alcohol users have been randomly chosen for the study, and they are, at the time of study, under drugs and alcohol abuse. There are 20 respondents from Dimapur, 20 from Kohima and 10 from Phek district. Random and purposive sampling was used to examine the drug and alcohol related issues and propose preventive and remedial measures to these twin social problems. Questionnaire and interview are the two important methods used for collecting the research data. A case study of an individual is also taken into account so as to understand the use of substance and alcohol and the various related problems. The secondary data is drawn from the published and unpublished sources, newspapers and internet data.

### **Addiction Scene in Nagaland**

The consequences of drug and alcohol abuse are serious in Nagaland. Drug and alcohol dependence causes extensive damages to an

individual's health, loved ones and the society. It takes the lives of hundreds of innocent and promising young people and intensifies situations involving violent crimes and domestic violence in the society. Drug and alcohol have led to the increase in crimes, tension and violence among the women such as prostitution, killing, cheating, stealing, rape, extortion, suicide, and manipulation. More the abuser of drug and alcohol are incline to health problems such as T.B., Hepatitis, liver infection, breast cancer, unwanted pregnancy and premature death. Drug and alcohol abuse have also resulted in problems such as domestic violence, separation, divorce, prostitution, pre-mature death, family quarrel and break up, cheating and wife beating. It has further resulted in the escalation of school and college drop-outs among the women in Nagaland.

Studies have pointed out that the social menace of drug dependency and alcoholism in Nagaland is alarming and, still worse, spreading rapidly. Drug abuse and alcoholism is playing havoc in many Naga families. Although there is no available statistics, it has been estimated that the number of drug users and alcoholics in Nagaland would cross a minimum total of 50,000 (Eastern Mirror, *Sunday, June 19, 2011*). It is also evident from the study that female intravenous drug users are less visible than male (IDUs) in Nagaland. This gender difference in injecting drugs indicates that female drug users are less disclosed or recognized in the society.

There are several causes of drug and alcohol abuse such as curiosity, peer pressure and mass media. Peer pressure is one of the most important causes of alcohol abuse among the people in the Nagaland. A changing social environment is one of the factors of 'alcohol abuse' among the youth. It also identified that mass unemployment of educated youth, school and college drop-outs and migration of rural youth to urban centers in search of work have also played their role in precipitating the abuse of drug and alcohol. Some of the other reasons responsible for the cause of drug abuse are frustration, anxiety, low self-esteem, depression, health problem, family problem, live in fear and shame. According to Virk (2002), no social function or party is considered a success unless expensive brands of whisky, scotch and beer flow freely and most respectable and

responsible guests are seen drinking even during day time. High school girls and boys celebrate their birthdays and valentine day with champagne. Longchar (1999) has stated about alcohol consumption that many young people say that they drink alcohol ‘for taste’, ‘to feel good’, ‘to relax’, and ‘on special occasions’. Some others say that they drink ‘to rebel’, ‘to experiment’, ‘to get drunk’ or ‘out of curiosity’ (p. 79).

The young persons throughout Nagaland have become the most vulnerable group and easy victims of drug and alcohol abuse. The young are by far the largest drug abusing section of the population of the state. It is also the youth who shape and influence the living environment of their fellow youth. The following table on the percentage distributions of the respondents of 50 current women drug and alcohol users (Kohima, Dimapur and Phek District) shows the various causes leading to substance and alcohol abuse in the Nagaland.

*Table 1*  
*Causes of Drug and Alcohol Abuse by Women*

Reason	Response	Percentage (%)	Total No. of Respondents
Anxiety	10	20.00	50
Peer pressure	19	38.00	
Frustration	18	36.00	
Depression	10	20.00	
Health problem	1	2.00	
Curiosity	10	20.00	
Family problem	12	24.00	
Lack of entertainment	4	8.00	
Other reasons	0	0.00	
Total			

**Source:** Field Survey of the three districts of Nagaland

*Note: The sample size is 50. Since the respondents gave more than one choice in the multiple choice questionnaire, the total of 50 does not match.*

The intake of substance and the consumption of liquor have been attributed to different reasons by drug users and alcoholics. The table above represents the main three factors for women taking to drugs and alcohol abuse, namely, peer pressure, frustration and family problems. Since there are usually a lot of reasons for taking drugs and alcohol, the percentages given for taking drugs and alcohol do not add up to 50 (the number of respondents as reflected in the study). The table specifies the percentage of varied reasons for drugs and alcohol abuse in Nagaland. The study shows that the respondents who considered peer pressure as responsible headed the list (38.00 %), followed by those who stated frustration (36.20 %) and family problem (24.00 %) as the reasons for taking to drugs and alcohol. These are the main three causes of drug dependence and alcoholism in the case of women in the Naga society. The other reasons for getting into the world of drugs and alcohol are lack of entertainment (8.00 %), anxiety (20.00 %), curiosity (20.00%), depression (20.00%), health problem (2.00 %); no one mentioned other reasons (0.00 %) as the cause. The influence of peer pressure constitutes the largest and most important factor in getting into drug and alcohol abuse.

### **Social Issues**

According to Ahuja (2003) alcoholism is to be understood in terms of character and motivation. An alcoholic is a sick man. He is not to be looked upon with ridicule, condemnation and blame. He has fallen victim to a set of complexes, attitudes and habits which bind him until the process of self-destruction is inevitable. However, this study shows that women drug users and alcoholics in Nagaland are stigmatized and discriminated on the following grounds: being looked down upon by the society, employment restriction, neglected by the family members and friends, and scolding by their parents.

Stigma is one of the meanest and most difficult aspects of addiction because it makes it harder for individuals and families to deal with their problems and get the help they need. Society imposes a stigma, with its consequent damage on users (addicts) and their families because many believe that addiction is a character flaw or weakness that probably can't be cured. The stigma against people with addictions is so deeply

rooted that it continues even in the face of the scientific evidence that addiction is a treatable disease and there individuals in families and communities living wonderful lives in long-term recovery (stigma-discrimination n/y).

Drug and alcohol users face the social stigma and discrimination of various types in Nagaland. Societal rejection towards drug users and alcoholics is an important issue that needs to be tackled in Nagaland. Stigma and discrimination by the community keeps the alcoholics away from the services meant for them. It is evident from the study that the government need to look into the matter seriously and protect the users (alcoholics) who are stigmatized and discriminated in Nagaland. Table 2 below represents the percentage distribution of the women respondents on the basis of stigma and discrimination based on their dependence on drug and alcohol.

*Table 2*  
*Stigma and Discrimination on Women substance abusers*

Types of Stigmatization and Discrimination	No. of Responses	Percentage (%)
Looked down upon by the society	32	64.00
Employment restriction	07	14.00
Neglected by family members and friends	27	54.00
Scolded by parents	16	32.00

**Source:** Field Survey of 50 Respondents (Kohima, Dimapur and Phek District)

*Note: Since all the respondents have marked more than one option, the sum total exceeds the sample size.*

The table above indicates the distribution of the respondents on the basis of stigma and discrimination. This depicts the percentage of current users (alcoholics) experiencing stigma and discrimination for their drug

and alcohol dependency. As there is a lot of drug/alcohol related problems, the percentage given in the figure for being stigmatized and discriminated do not add up to 50 (or the number of female users referred in the study). The percentage simply shows the percentage of users facing a particular problem of stigma and discrimination in the Nagaland.

It is evident from the above table that the greatest stigma and discrimination faced by the drug users and alcoholics was that of ‘being looked down upon by the society’ (64.00 percent). The second highest stigma and discrimination is ‘being neglected by family members and friends’ (54.00 percent). Scolding by parents for being in the habit of drug and alcohol abuse constitutes (32.00 percent). The study reveals that the drug and alcohol users (14 percent of them) has been restricted from employment on account of substance and alcohol abuse in the Naga society. Discrimination hurts the stigmatized groups since they are excluded from the so called “normal” people.

The study is also based on ‘A case study of an individual’ (female alcohol user) in Dimapur. She faced many problems because of her alcohol dependence. She abuse alcohol and engage in prostitution to earn a livelihood for herself and for her family. She could get customers only when she is drunk. Mixing alcohol and sex placed her at the risk of HIV, especially because of multiple sex partners. She continued to use alcohol because of family problem, unemployment and unhealthy relationship with the family members. She buys alcohol with her own income, and from booze joints and friends. Her first experience with alcohol was enjoyable and she felt relieved of her problems. She opines that alcoholics should be loved and cared for, and not stigmatized or discriminated against because of their use of alcohol.

Prostitutes drink alcohol under the direct influence of male customers who want prostitute to give them more sexual pleasures, to remove physical and mental tiredness caused by repeated consummation of the body. According to a report, in Dimapur city, spread over almost every corner of the city, there is an estimated total of 4000 female sex workers, 50% of whom are local girls and 50% non-local girls between the



age group of 16 to 40 years. Police and IRB raids have not stopped the rise in the figures. A report prepared revealed that the local girls refused to reveal their identities. Some are highly educated; some are school drop-outs and a few uneducated. The reasons for being in the “business” ranged from unemployment, high economic demands because of their living standards or wanting to earn extra money. Some girls from rich family backgrounds said that they were in the “business” purely “for enjoyment”. Married, unmarried, widows, divorcees or students made up this group of sex workers. Some of the girls are forced into the trade after being duped, while for others, it is due to economic compulsions. One of the categories of sex workers is the booze joint-based sex workers; they operate in the illegal liquor drinking places of Dimapur (Nagaland Post, July 29, 2013).

### Health Issues

Drug and alcohol abuse is a concern because it poses a threat to the users’ and alcoholics’ social life and health. It’s not just heavy drinkers who need to worry about the health implications of alcohol but even light drinking could increase sickness or diseases. The study conducted in the three districts of Nagaland shows that the drug and alcohol users are deprived of the normal prevailing treatment at government and private health care centers. The following table highlights the treatment procedures where some users are stigmatized due to their dependency on drugs and alcohol.

*Table 3*  
*Nature of Treatment at Health Care Centre*

Treatment Status	No. of Respondents	Percentage (%)	Total No. of Respondents
Treated alike	19	38.00	50
Treated differently	14	28.00	
Both	17	34.00	
Total	50	100.00	

**Source:** Field Survey of 50 Respondents; Nagaland.

The study indicates the nature of treatment meted out to the addicts. Table 3 shows the distribution of the respondents on the basis of nature of treatment they received at health care centers or hospitals. As regards same treatment, it shows that 38 percent of users are given the same treatment as that of non-drug and alcohol users. The proportion of respondents who are not provided the same treatment constituted of 28 percent, and those who sometimes receives equal treatment came to 34.00 percent. The study proves that nearly one-third of the female drug/alcohol users who went for treatment are deprived of the treatment given to the non-users.

Heavy drinking can lead to increased risk of health problems such as liver disease, brain damage and breast cancer. Women are as likely as men to recover from alcohol dependence, but women may have more difficulty gaining access to treatment. Women drinking alcohol are at increased risk of car accidents and other traumatic injuries, cancer, stroke and suicide. Women who drink heavily also have an increased risk of falls and hip fractures, infertility and miscarriages, high blood pressure and heart disease. Drinking alcohol during pregnancy can cause an array of physical and mental birth defects. When a pregnant woman drinks, alcohol passes through the placenta to her fetus. Physicians and public health officials recommend that women should avoid all alcohol during pregnancy (Women\_alcohol n/y).

It's not just heavy drinkers who need to worry about the health implications of alcohol but even light drinking could increase sickness or diseases. Frequent intoxication damages the mouth, esophagus, stomach and especially the liver, where overloading of the metabolizing process can cause hepatitis and cirrhosis. Heavy drinking affects the heart and is linked to brain disorders. Alcohol is particularly dangerous when taken with barbiturates or tranquillisers, causing deep sedation, a drop in blood pressure and possible breathing failure. Women who drink alcoholic beverages, even in moderation, are at a significantly greater risk of developing breast cancer (Sain, 1991).

Few studies have examined drug-related HIV among female drug users beyond monitoring prevalence of sexually transmitted infections, HIV, reproductive tract infections, hepatitis B or C, injecting behaviour and practice of sex work (Narain, 2004). Women drinking alcohol can lead to increased risk of health problems such as liver infections, brain damage and breast Cancer, T.B, Hepatitis, HIV/AIDS, premature death etc. It could be stated that injecting drugs may lead to probability of HIV/AIDS. It is evident from the reliable source that mixing sex with alcohol increases the chances of unintended pregnancy, and exposure to sexually transmitted infections. This is because if one has sex when he or she is drunk, a person is much less likely to be thinking clearly enough to use condoms, or to use them correctly (Eastern Mirror, April 2, 2008).

### **Treatment**

Health treatment and services are available in all the three districts of Nagaland considered for study. It is evident from the study that the district hospitals and private clinics and hospitals are insufficient in meeting the health care of the addicts and alcoholics. There are various drugs and alcohol related working agencies both of government and NGOs which provide treatment and rehabilitation services. Some of the NGOs agencies in the three districts of Nagaland are:

- i. Kripa Foundation, Youth Mission Rehabilitation and Counseling Center, and Family Planning Association of India in Kohima,
- ii. Prodigals Home, Bethesda Youth Welfare Center, Shalom Rehabilitation Center, and CAD Foundation in Dimapur, and
- iii. Eureka Life Foundation, Rukizumi Welfare Society, and Truth Triumph Mission in Phek.

The above mentioned agencies and centers provide very good services and help to withdraw from such habits; they provide counseling in helping the abusers back to normal life. Substance and alcohol abusers seek help from various treatment centres/rehabs, hospitals, D.I.Cs, etc. Women in Nagaland who have experienced the use of drug and alcohol seek help with regard to their addiction problem. The study conducted on the users in Nagaland confirms that very few of the women drug

addicts/alcoholics seek the treatment and services available in the state. Some of the drug users and alcoholics do not know that the services available in Nagaland.

### **Suggestions and Recommendations**

1. Formulate awareness programs and educate people about the ill effects of drug/alcohol abuse.
2. Set up drug and alcohol treatment and services centers such as Rehabilitation, Detoxification and Counselling Centers, Drop-in-Centers by Government and NGOs.
3. Families and society should not discriminate against or stigmatize the women drug/alcohol users, but show concern, love, support and show them ways and means to get into the main stream of life.
4. There is the need to establish good hospitals in order to meet health implications especially of women as they are incline to more health problem against their male counterpart.

### **Conclusion**

It may thus be concluded that the problem of drug and alcohol abuse need to be addressed well and embrace treatment, social measures and health care in special reference to the women in Nagaland. Drug abuse and alcoholism are detrimental to individuals as well as to the society. It is heartache to see many young women abusing substances and alcohol which results in the social and health aspects of their lives. The problem of substance abuse and alcoholism is more acute among young women in Nagaland. Societal rejection of drug addicts and alcoholics is an essential matter that needs to deal with and, they need to be provided the privileges and services meant for them. It is evident from the study that the government need to look into this problem with urgency and protect the drug users and alcoholics who are stigmatized and discriminated against in Nagaland. Substance and alcohol abuse among women in Nagaland need to be monitored and reduce for better and healthier living.

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