“Study of substance abuse among street children near Bangalore Medical College, Bangalore”

Vijay Kautilya D¹, Sathish K V², Shruti Prabhat Hegde³

¹Associate Professor, Dept. of Forensic Medicine & Toxicology, ²Assistant Professor, Dept. of Ophthalmology, Shri Sathyai Sai Medical College & Research Institute
³Associate Professor, Dept. of Forensic Medicine & Toxicology, Bangalore Medical College & Research Institute, Bangalore

*Corresponding Author:
E-mail: kautilya.dactroo@gmail.com

ABSTRACT

Background: Abuse of psychoactive substances has been a problem in the society since ages. And the patterns of substances abused keep changing in every society. Street children are a marginalized group of our society who harbour a variety of social and cultural problems. There is an urgent need to understand their problems better so as to be able to cater to their needs.

Method: This is a cross sectional descriptive study where 30 street children were interviewed regarding their personal and work problems. Patterns of abuse of substances by these children was studied based on their interview.

Results: Most of the children have ended up on the street to escape from exploitation at home. Due to pressure and influence from friends they take to substance abuse. They start with tobacco; proceed to solvent abuse (80%), alcohol (80%), and cannabis (63.3%). Use of tobacco and solvents starts early at an average age of 8 years. Cannabis is taken by older children.

Conclusion: These children face a variety of problems at home and also at work. They are highly exploited by the community. Most children take to high risk behaviour to overcome these hardships. Better understanding of this socially outcast community is the need of the hour in order to curb this evil of substance abuse.

Key words: Drug abuse, street children, substance abuse, risk behaviour.

INTRODUCTION

Abuse of psychoactive substances has been existent in the society probably from eternity. Men have time and again opted to be in a state of dream and escape from reality by opting to mind altering substance. This problem has risen at all levels in the society in various forms. Drug trafficking is one of the most profitable trades along with petroleum and weapons trade. Every country has and is facing this problem in its own way. Newer forms of drug abuse patterns like solvents are on the rise probably due to strict regulations on other recognized forms of abuse.

Street children in India constitute a group of marginalized population in most urban centers of the country. They constitute children living in streets permanently, who are detached from their families and live on the streets temporarily, children who belong to poor families and spend most of their time on the streets, children living with their families on the streets etc¹.

There are an estimated 100 million street children worldwide of which 30 million are in Asia and 10 million in Africa. India alone has an estimated number of 414,700 street children in its major cities ¹. It is found that about 80,000 street children live in and around Bangalore. Roughly about 60 new children land up on bus stands and railway stations every day in Bangalore².

These children have to put up with a variety of physical and mental abuse and hence are a concern for a wide range of social issues. Poly substance abuse is common among these children and often solvents are the first psychoactive substance they attempt to try³. Not much is known as to why children adopt such abusive behavior. Solvents are freely available in the market without any regulations in India. Though a lot of global awareness is reached about this form of abuse it is yet to be recognized by the political circle in the country. This study is the part of a pilot study done to establish the pattern of drug abuse among street children in Bangalore and attempts to derive the reasons for adoption of such abusive behavior in the street children in Bangalore.

METHOD OF STUDY

The study was conducted over a period of two months in Bangalore during September and October 2010 with the help of volunteers of BOSCO (Bangalore Onyavar Seva Coota), an NGO working for street children. Thirty Street children near Railway station, bus stands and Shivaji Nagar market near Bangalore medical college, Bangalore were identified with the help of the volunteers who work in those areas and these children were interviewed.
based on a pre-decided proforma. This was part of an attempt to do a pilot study for a project to evaluate the prevalence of solvent abuse in Bangalore. The interview was conducted in their own mother tongue. Information regarding their families, personal ties, work, habits and pattern of drug abuse was collected. The information collected from these children was tabulated and the data analyzed for rates, ratios and descriptive statistics with SPSS version 16 software.

RESULTS

The sample consisted of thirty boys (14 from shivaji nagar market area, 6 from the bus stand area, and 10 from the railway station) as it was extremely difficult to find the girls on the street. The girls preferred to stay in their own groups usually with boys smaller their age for protection. Most of the girls were apprehensive to interact with strangers for the fear of prostitution and exploitation. The boys could be approached during the evening or in noon time when they visited the shelters established by BOSCO to spend time or watch TV.

Of the thirty boys interviewed 60 % (18) were of about 18 years of age. The youngest child interviewed was 8 years old. 70% (21) had spent about 10-18 years on the streets. 53.3% (16) hailed from different regions of Karnataka. Of the rest 23.3% (7) and 16.7% (5) had come too Bangalore from states of Andhra Pradesh and Tamilnadu respectively. None of the thirty children had completed schooling however 60% (18) had attended school for some time and dropped out. Reasons given for dropping out of school were varied like lack of interest, need to earn a living, parental pressure or having run away from home. 23 (76.7%) had no families and stayed on the streets as they had no choice, 7 children (23.3%) had run away from their homes and landed up on the streets in Bangalore. Two of these children had runaway twice from their homes due to lack of care given in their home.

They lack shelter and spend most of their time on streets. 20% (6) of the children sleep on the railway platform at nights, 26.7% (8 children) slept on the foot path in the market, 43.3% (13 children) had a home in the slums in the city and could go to their homes if required but preferred to stay on the streets most of the time and only 3 children used to go home to sleep. Most stayed on the streets as their busiest working hours were early in the morning at 2am to 6am as unloading and loading of commercial goods. 25 children (83%) worked as Coolies (cheap labor for loading and unloading goods). Other used to work in cycle shops or as cart pullers and rag pickers. Children earned anywhere between 100 rupees to 500 rupees a day (average 235rupees) which is a good amount in Bangalore to have desert living in Bangalore for one person. But the children also end up spending the entire amount in the same day indulging in recreational habits or substance abuse. When asked about the reason for this almost all had to say that if they do not spend it on the same day it would be taken by other elder children or police personnel for allowing them to sleep in railway stations and market places. 43% (13 children) have been working in the streets in this manner for about 10-14 years.

Pattern of Substances abused in children-

It was observed in the study that all the children were in the habit of some form of substance abuse for pleasure. Tobacco, solvents, alcohol and cannabis were common substances abused by these children and each of these demonstrated a peculiar pattern of use.

All the children interviewed were in the habit of smoking tobacco and few used chewing tobacco also. Youngest age for exposure documented was 6 years with the average age for taking to tobacco abuse being 8.22 yrs in the sample studied. Children started with 1-2 cigarettes and progressed to use at least a pack of cigarettes per day. They claim to feel a kind of pleasure, relief and increased self confidence after smoking. Smoking was an activity they did in groups just to keep up with friends.

Solvent abuse was confessed by 24 (80%) of the children in the study group. Average age to start solvents was 8.07 years in the study group with the youngest child to take to this form of abuse being 6 years of age. Huffing was the most common method of use by the children. Ink remover and Whitener which are freely available in the stationary shop were the most commonly abused solvents. Children spread the solvent on a piece of cloth and snuff on the same for long hours. All the children were first introduced to solvents by friends who use it. They initially start using it one time a day and progress to use an average of 3-4 bottles a day. After the use the children claim to have a kind of “kick” or “Nasha” which is pleasurable. Few claim to use it as it helps them to sleep, control hunger, builds confidence. Few believed it makes their muscles look more prominent and appealing to others. Glue used for rubber was thought to give higher kick then solvent by the children at it was used only by a few. Use of solvents makes the children vulnerable to other hence they preferred sniffing in groups.

Average age to experiment with alcohol was about 10.93 years in the study group. 80% (24 children) agreed to use alcohol for its pleasurable effects. However the children claimed to drink beer or local whiskey on an average of about once a week usually on weekends for recreational purpose. It was primarily used to relax and sleep on weekends.

Nineteen children (63.3%) claimed to use cannabis. Ganja (dried leaves) available is smoked by the children. It was found to be common in older
children as the mean age to begin cannabis was 13.5 years. The youngest child to start cannabis was 12 years old. Regular users use it 2-3 times a day. All the children use it to get a kick or “Nasha” out of it.

All the children claimed that they were introduced to substance abuse by friends. 53% (16 children) told that they were first forced to take to these substances by other street children. 86.7% (26 children) did not regret using these substances and they spent an average of 244 Rs/day on substance abuse. 80% (24 children) said they use the substances for the pleasure they derive out of them. All the children claimed that they were introduced to substance abuse by friends. 53% (16 children) told that they were first forced to take to these substances by other street children. 86.7% (26 children) did not regret using these substances and they spent an average of 244 Rs/day on substance abuse. 80% (24 children) said they use the substances for the pleasure they derive out of them.

Stress factors-
Life on the street for these children is not easy and they have to put up with a variety of hardships and problems. We identified a set of common problems these children face at home and at work and tried to analyze their influence over the pattern of substance abuse.

Ten problems faced by these children at homes were identified and their prevalence in all the children was estimated. Percentage prevalence of a pattern of substance use among children with specific problems at home was calculated and is represented in Table no 1. Similarly eleven problems faced by these children at their work were identified and their prevalence in all the children was estimated. Percentage prevalence of a pattern of substance use among children with specific problems at work was calculated and is represented in Table no 2. On counting the number of problems faced by the children it was found that every child faced an average of 5 problems at home and 8 problems at work from the list of problems evaluated. Minimum score of reported problems by the children was 4 at home and 7 at work.

High Risk behavior-
A set of thirteen risk factors for substance abuse were identified and the children were evaluated for their presence. Their prevalence in all the children was estimated. Percentage prevalence of a pattern of substance use among children with specific risk factor was calculated and is represented in Table no 3. Average risk score got by counting the number of risk factors for substance abuse present in a child was 9, with the minimum risk score being 8. 26.6% (8 children) accepted to have committed theft at least once and all the children have sold drugs to their friends and strangers to make money. 50% (15 children) reported to have been held by the police for small offences on the streets. 83.3% (25 children) confessed of being involved in quarrels with children of other groups very frequently. Fourteen children (46.7%) had friends who died while experimenting with drug.

Table 1: Percentage Prevalence of problems faced at home by the Street children

<table>
<thead>
<tr>
<th>Sl/no</th>
<th>Problems faced at Home</th>
<th>Overalla</th>
<th>Polysubstance usersb</th>
<th>Solvents usersb</th>
<th>Cannabis usersb</th>
<th>Alcohol usersb</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Poor economic situation</td>
<td>100.0</td>
<td>40</td>
<td>80</td>
<td>63.3</td>
<td>80</td>
</tr>
<tr>
<td>2</td>
<td>Alcoholic parents</td>
<td>60.0</td>
<td>44.4</td>
<td>88.9</td>
<td>61.1</td>
<td>88.9</td>
</tr>
<tr>
<td>3</td>
<td>Forcely forced work for family</td>
<td>86.7</td>
<td>31.0</td>
<td>72.4</td>
<td>55.2</td>
<td>69.0</td>
</tr>
<tr>
<td>4</td>
<td>Physical torture by guardian / parent</td>
<td>10.0</td>
<td>33.3</td>
<td>100.0</td>
<td>33.3</td>
<td>100.0</td>
</tr>
<tr>
<td>5</td>
<td>Problems by step parents</td>
<td>10.0</td>
<td>33.3</td>
<td>100.0</td>
<td>33.3</td>
<td>100.0</td>
</tr>
<tr>
<td>6</td>
<td>Parents separated</td>
<td>13.3</td>
<td>0</td>
<td>100</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>7</td>
<td>Lack of care and protection</td>
<td>83.3</td>
<td>40</td>
<td>80</td>
<td>68</td>
<td>76</td>
</tr>
<tr>
<td>8</td>
<td>Sexual abuse</td>
<td>6.7</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td>9</td>
<td>Not interested in studies</td>
<td>93.3</td>
<td>42.9</td>
<td>78.6</td>
<td>67.9</td>
<td>78.6</td>
</tr>
<tr>
<td>10</td>
<td>Others</td>
<td>30.0</td>
<td>33.3</td>
<td>77.8</td>
<td>55.6</td>
<td>77.8</td>
</tr>
</tbody>
</table>

aPercentage prevalence of problem in street children in the study group
bPercentage of street children with the problem involved in the pattern of substance use.

Table 2: Percentage Prevalence of problems faced at work by the Street children
Experimentation with substance abuse among street children near Bangalore Medical College...

<table>
<thead>
<tr>
<th>Sl/no</th>
<th>Problems Faced at work</th>
<th>Overalla</th>
<th>Poly-substance usersb</th>
<th>Solvents usersb</th>
<th>Cannabis usersb</th>
<th>Alcohol usersb</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Abuse at work</td>
<td>76.7</td>
<td>52.2</td>
<td>78.3</td>
<td>73.9</td>
<td>91.3</td>
</tr>
<tr>
<td>2</td>
<td>Beaten by police</td>
<td>73.3</td>
<td>54.5</td>
<td>90.9</td>
<td>63.6</td>
<td>81.8</td>
</tr>
<tr>
<td>3</td>
<td>Beaten by public</td>
<td>80.0</td>
<td>50.0</td>
<td>91.7</td>
<td>66.7</td>
<td>83.3</td>
</tr>
<tr>
<td>4</td>
<td>Sent to jail/remand home</td>
<td>66.7</td>
<td>60</td>
<td>80</td>
<td>90</td>
<td>90</td>
</tr>
<tr>
<td>5</td>
<td>Harassed by other street children</td>
<td>93.3</td>
<td>42.9</td>
<td>85.7</td>
<td>64.3</td>
<td>89.5</td>
</tr>
<tr>
<td>6</td>
<td>Forced to drugs/substance abuse</td>
<td>70.0</td>
<td>42.9</td>
<td>90.5</td>
<td>61.9</td>
<td>71.4</td>
</tr>
<tr>
<td>7</td>
<td>Forced begging</td>
<td>26.7</td>
<td>50</td>
<td>75</td>
<td>100</td>
<td>75</td>
</tr>
<tr>
<td>8</td>
<td>Abused sexually by elders</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td>9</td>
<td>Involved in antisocial activity</td>
<td>63.3</td>
<td>52.6</td>
<td>73.7</td>
<td>89.5</td>
<td>89.5</td>
</tr>
<tr>
<td>10</td>
<td>Difficulty for basic needs</td>
<td>100.0</td>
<td>40.0</td>
<td>80.0</td>
<td>63.3</td>
<td>80.0</td>
</tr>
<tr>
<td>11</td>
<td>Others</td>
<td>6.7</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
</tr>
</tbody>
</table>

a Percentage prevalence of problem in street children in the study group
b Percentage of street children with the problem involved in the pattern of substance use.

**DISCUSSION**

Street children constitute a socially marginalized set of population who are very difficult to approach. This study constituted of 30 male children on the streets. It was very difficult to contact female children similar to what was described by Pagare et al. in Delhi. These children were of the age group between 8 -18 years. 76.7 % of these children stayed on the streets in Bangalore even though some children had their families living close to them as they have to put up with a lot personal problems similar to what was documented by other studies by Benegal et al., Pagare et al., Poonam et al. etc.

Benegal et al. in a similar study in Bangalore found that 69% of these children preferred to be on the streets and 24 % hailed from economically poor families. 81.9% of these children were male and earned up to 150 rupees a day. Majority of them took to substance abuse to feel happy, and felt it as form of relief from various problems. They started with tobacco, solvents and proceeded to use of cannabis and alcohol.

Pagore et al. in a study of 115 children in Delhi found that 68.7% of the children faced some form of abuse at home and 57.4% took to substance abuse on the streets. Earliest age to begin substance abuse was 5.5 years compared to 6 years as in our study.

Poonam et al. in a study of 217 children in Mumbai of 2015 showed that 44.23% of them on the streets reported substance abuse. 11.3 years was the mean age to start use of these substances. Males (63.54%) had higher rate of substance abuse compared to females. According to them 39.34% used cannabis, 37.7% used alcohol and 32.8% took to solvent abuse. 70.5% of the children said they started use of drugs out of inquisitiveness.

Sharma et al. in a study of 487 children in Delhi showed that 25.7% of them addicted to tobacco, 17% used alcohol, 15.8% used solvents and 26.3% were involved in poly substance abuse. Peer pressure was considered primarily responsible for driving these children to drug abuse.

Immaculate Mary suggests that 32.1% of children below 18 years of age take to substance abuse on the street. They usually start with tobacco and proceed to solvents. Cannabis is usually started by bigger children above 13 years of age. Though
lots of laws are existent to prevent use of dangerous substances by children these are not effective enough in controlling the problem 7.

Khan et al in a study of street children in Pakistan claimed that 90% of the children have taken to glue sniffing as it is cheap and easily available without any strict regulations. 40% of these children suffer from some form of ill health due to this habit (8). Similar conditions have been reported in various cities of Nepal, East Timor, Vietnam, Hongkong etc. 65.9% of these children live on the street with their families and 66.8% have some form of physical abuse 9.

These children face a variety of personal problems at their homes and at work. They are exposed to a variety of risk factors normally considered for substance abuse. Peer pressure, pressure from friends, work stress, easy availability of drugs, rebelliousness and development of antisocial behavior on the streets push these children into substance abuse.

CONCLUSION

From the data got from interviewing these children it could be realized that most of these children had personal issues at home for which they ended up in street. Though they get to earn a descent living they are not able to save any of their earnings for the fear of loss to authorities and elder children. This encourages them to spend their earnings on the same day. Friends introduce them to drugs and other substances of abuse. They start with tobacco and proceed to solvents. Cannabis is usually used by older children. Alcohol use though is common the pattern of use seems more recreational than abusive. Regular use of these substances leads them to not only suffer physical and psychological problems but also leads them to antisocial behavior like theft, trafficking and quarrels.

Extensive and planned research is necessary to better understand their behavior so as to be able to help them overcome their problems on the street and induct them into the mainstream society. A lot of social, political, educational and personal motivation is necessary to overcome this problem of substance abuse among street children.

ACKNOWLEDGEMENTS

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