Mental Health of Substance Abuse and Non- Substance Abuse Indian College Students.

Bhawani Singh Rathore¹ & Dr. Uma Joshi²

¹Research Scholar, Ph.D. (Clinical Psychology), Amity Institute of Behavioral and Allied Sciences (AIBAS), Amity University Rajasthan, Jaipur.
²Ph.D., Former: Dean, Humanities, Social Science and Liberal Arts; Former: Director, Amity Institute of Behavioral and Allied Sciences (AIBAS), Amity University Rajasthan, Jaipur.

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ABSTRACT

**Background:** Mental health is adjustment of human being to the world and to one another with a maximum of effectiveness and happiness. Mental health among young male is defined as a state of well-being in which every individual realizes his or her own potential, can cope with normal stresses in life, can work productively and fruitfully, and is able to make a contribution to his or her community.

**Methodology:** It is an ex-post facto study of 300 youth who suffer from substance abuse (100 males & 50 females) and those who do not suffer from substance abuse (100 males & 50 females) college students in the age group of 18-24 years. ANOVA and Duncan multiple range test were used to analysis the result of the present study. To test the mental health of youth MAP-A was applied.

**Result:** The mean scores on mental health was found to be significantly higher among those youth who do not suffer from substance abuse (M= 3.22; F=3.84), as compared to those who suffer from substance abuse (M=2.39; F=3.28; F= 8.276, p<.05). Considering the gender analysis, the scores on mental health were significantly higher among females as compared to males (F= 9.766, p<.05). However, the interaction effect of substance abuse and gender was not significant (F= .312, p>.05). Further, the post hoc comparison of mental health, using Duncan LSD method revealed that male youth with poor maturity revert to substance abuse but this does not hold for female youth. Female substance abusers were more mature than males.

**Conclusion:** India being the youngest country, with a maximum population of youth in the world by 2020, emerges as the ambassador of promoting world peace and harmony. Though, in the present study, women who suffer from substance abuse are drinking alcohol in routine, but, it might be possible that they do mindful drinking at times, which does not affect their mental health in a negative way.

**Keywords:** Gender, Mental Health, Substance Abuse, Youth.

Introduction

Mental health is adjustment of human being to the world and to one another with a maximum of effectiveness and happiness. Excess use of substance largely affects youth mental health (Herrman, Saxena & Moodie, 2006). Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices (Fallot, 2001). Mental health is important at every stage of life, from childhood and adolescence through adulthood to old age (Kapp, 2001). Evidence reported that people often abuse alcohol or drugs to ease the symptoms of an undiagnosed mental disorder, to cope with difficult emotions, or to temporarily change their mood (Saisan, 2018). Unfortunately, abusing substances cause side effects and in the long run often worsens the symptoms they initially helped to relieve. An individual with poor mental health has low energy and lack of motivation. They take drugs and alcohol to increase their drive to gather energy to take up the task done (Saisan, 2018). Youth are the future of the nation. They shape the state and status of any country. They are the drivers of any developmental trend and activity in society and major determinants of the extent of growth and development in any given society. India is the youngest country in the world, approximately 40 per cent of the Indian population is in the age range of 13 to 35 (UNDCP, 1997). Alcohol addiction among youth has taken the shape of the epidemic in states like Punjab, Haryana and establishing its jaws in Rajasthan and other states as well in India. Such a scenario exist worldwide (Bhowmick & Radhakrishnan, 2014). The picture is grim if we look at the world trade and statistics on the substance addiction scenario with a turnover of around $500 billion, it is the third largest business in the world, next to petroleum and arms trade (Ash, 2003). Drinking behaviour has been an important way to symbolize, and regulate gender roles, by making it a symbol of masculinity which promotes alcohol consumption among male population as compared to female, however, this practice is at a steep rise among young females also (Rathore, Joshi, Pareek, 2017; Sardinas-Wyssling, 1980). This may indicate a paradigm shift in values in the modern times.
Therefore, it is pertinent to study the mental health of youth who suffer from substance abuse and those who do not suffer from substance abuse.

**Objective:**
- To study the effect of mental health of youth who suffers substance abuse and those who do not suffer from substance abuse.

**Hypothesis of the study**
- Youth who suffer from substance abuse do not differ significantly in their scores of mental health as compared to the control group of those who do not suffer from substance abuse.

**Material and Method**

**Study design:** The present study is a quasi-experimental research using an ex-post-facto investigation of a cross-section of a sample of college students from different cities of Rajasthan who suffered from substance abuse and a comparable control group of students who did not suffer from substance abuse on mental health. The study was conducted over a short period of three months from (August to October 2017).

**Setting of the present study:** Students from different colleges & universities from Jaipur, Udaipur, Jodhpur, Bikaner, Ganganagar and Ajmer (registered as regular students in some educational institutions of different streams) comprised the sample of this study. The number of students contacted from each city was varied, depending on the information of availability of college students who suffered from substance abuse and were willing to participate in this study. This is not an intervention based research and no clinical trials on samples were conducted.

**Sample:** A total number of 300 college youth were selected through the screening process from same colleges & universities all in the age range of 18-24 years, including 150 students (100 males & 50 females) who suffered from substance abuse and an equal number of 150 students (100 males & 50 females) who did not suffer from substance abuse to serve as the comparison group. Due to the stigma and guilt element and fear of disclosure of substance abuse behaviour, the word of mouth, referral method and snowball technique was used to identify those college youth who suffer from substance abuse. It was non-probability (nonrandom) purposive method of sample selection. However, after contacting the youth through the above mentioned techniques, a screening test CRAFTT for adolescent substance abuse was administered on them and those, who qualified in this test were included in the study and were given other tests.

**Reason for choosing this sample for the present study:**
It is painful to accept that the universities and the colleges (the educational institutions) are becoming the central places for the availability, trading, experimentation, peer pressure and succumbing to alcohol and drug behavior. As youth is said to be the most vulnerable stage, who is struggling between urge of independence and lack of direction, is exposed to all kinds of temptations (risky behaviour, adventures, peer pressure etc.) are more vulnerable to fall prey to substance abuse and its consequences. The college sample, therefore, becomes the fertile grounds for this study.

**Inclusion criteria**
- Registered students in different universities & college students of different cities of Rajasthan.
- Pursuing graduation and higher education in different streams as regular bonafied students.
- Students who were suffering from substance abuse but are not hardcore substance addict taking assistance in deaddiction.
- Those students who could qualify the screening test of substance abuse.

**Exclusion criteria**
- Part-time and distance learning students would not be included.
- Those who were seeking psychiatric or psychological assistance for substance addiction.
- Those who could not qualify to be included in the study on the basis of the screening test.

**Statistical tool used**
Statistical techniques used were Analysis of Variance (ANOVA) and Post hoc Duncan multiple range test using LSD method were computed with the help of SPSS software IBM-20.

**Test to be used:**
**Screening tool- CRAFTT (Car, Relax, Alone, Forget, Family or Friends, Trouble)-** It consists of 9 items screening tool of potential involvement with alcohol and other drugs during the past 12 months. Scoring and Interpretation: Part A: If “yes” to any questions in Part A, and “no” to Part B of the screening test are to
be assigned one score each. Norms: Score 0-1 No problems reported, 2+ Potential of a significant problem. This test is available as an open access from the authentic website http://www.coloradohealthpartnerships.com/provider/care/CRAFFT.pdf. It has been used in several studies (Dhalla, Zumbo & Poole, 2011; Knight et al., 1999).

**Personality- Multi-Dimensional Assessment of Personality Series (MAP Form Adult):** This test is constructed by “Sanjay Vohra” (2011). It measures 20 primary dimensions of personality. One of the dimensions of this MAP form is mental health it has 147 questions. This test is appropriate for the age group of 18 years and above and takes about 45 minutes to complete. The split-half reliability was reported to be mental health (.73). The Factorial Validity Coefficients in mental health is (.83).

**Result**

Table 1.1 Mean, SD, F ratio, Duncan multiple range (LSD method) and Level of Significance of Mental health of youth who suffer from substance abuse and those who do not suffer from substance abuse.

<table>
<thead>
<tr>
<th>Youth who suffer from substance abuse &amp; do not suffer from substance abuse</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>F</th>
<th>“p” value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance Abuse</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>2.39</td>
<td>2.211</td>
<td>8.276</td>
<td>.004***</td>
</tr>
<tr>
<td>Female</td>
<td>3.28</td>
<td>1.604</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>2.69</td>
<td>2.066</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non Substance Abuse</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>3.22</td>
<td>1.796</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>3.84</td>
<td>2.132</td>
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<td></td>
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<tr>
<td>Total</td>
<td>3.43</td>
<td>1.929</td>
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<td>Gender Analysis</td>
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<tr>
<td>Male</td>
<td>2.80</td>
<td>2.051</td>
<td>9.766</td>
<td>.002***</td>
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<tr>
<td>Female</td>
<td>3.56</td>
<td>1.898</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>3.06</td>
<td>2.030</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interaction Substance Abuse &amp; Gender</td>
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<td></td>
<td>.312</td>
<td>.577</td>
</tr>
<tr>
<td>Substance Abuse Male Substance Abuse Female</td>
<td>-.060</td>
<td></td>
<td></td>
<td>.861</td>
</tr>
<tr>
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<td></td>
<td>.071</td>
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<td>-.830</td>
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<td>.003***</td>
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<td>.157</td>
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<td>Substance Abuse Male Non- Substance Abuse Female</td>
<td>-.145</td>
<td></td>
<td></td>
<td>.00***</td>
</tr>
<tr>
<td>Substance Abuse Female Non- Substance Abuse Male</td>
<td>.060</td>
<td></td>
<td></td>
<td>.861</td>
</tr>
</tbody>
</table>

Significant at =.05 level*; .01 level**; beyond .01 level***

N=300 (Male=100 substance abuse; 100 non-substance abuse; Female=50 substance abuse; 50 non-substance abuse)

The mean scores on mental health was found to be significantly higher among those youth who do not suffer from substance abuse (M= 3.22; F=3.84), as compared to those who suffer from substance abuse (M=2.39; F=3.28; F= 8.276, p<.05). Considering the gender analysis, the scores on mental health were significantly higher among females as compared to males (F= 9.766, p<.05). However, the interaction effect of substance abuse and gender was not significant (F=.312, p>.05). Further, the post hoc comparison of mental health, using Duncan LSD method revealed that male youth with poor maturity revert to substance abuse but this does not hold for female youth. Female substance abusers were more mature than males.

**Discussion**

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices (Fallot, 2001). Mental health is important at every stage of life, from childhood and adolescence through adulthood to old age (Kapp, 2001). Evidence reported that people often abuse alcohol or drugs to ease the symptoms of an
undiagnosed mental disorder, to cope with difficult emotions, or to temporarily change their mood (Saisan, 2018). Unfortunately, abusing substances cause side effects and in the long run often worsens the symptoms they initially helped to relieve. An individual with poor mental health has low energy and lack of motivation. They take drugs and alcohol to increase their drive to gather energy to take up the task done (Saisan, 2018). The question arises that why substance abuse female drink harder despite having good mental health? The possible justification could be – firstly, the sample criteria of women in the present study are (women who are educated, women who are open up and modern in thoughts, they belong to middle economic backgrounds, etc.). Drinking alcohol becomes a general part of socialization among rich communities (Smith, 2018). Though, in the present study, women who suffer from substance abuse are drinking alcohol in routine, but, it might be possible that they do mindful drinking at times, which does not affect their mental health in a negative way (Finlay, Ram, Maggs & Caldwell, 2012). Drinking alcohol after a day-workout is now a common culture among college students and it is a part of leisure activity for students now days (Sampson & Read, 2016). Few evidences which are in line with the present study also report an association between good mental health and drinking wine/alcohol (Burgen, 2013).

Conclusion: This study bears important findings that mental health plays an important role in substance abuse behaviour among youth.

Conflict of Interest: The authors declare no conflict of interests.

Source of funding: Self

References