



K.R. MANGALAM UNIVERSITY
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SCHOOL OF BASIC AND APPLIED SCIENCES

A STUDY

On

DE – ADDICTION CAMPAIGN

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CASE STUDY OF DE-ADDICTION ACTIVITY

Introduction:

The addiction of anything or commonly characterized by the habitual and uncontrollable use of substances, stands as a pervasive global challenge. Its ramifications extend beyond individual struggles, impacting the fabric of societies on both social and economic fronts. The current landscape of addiction of alcohol, tobacco and drug is alarming, with profound implications for our communities. At the forefront of this, crisis is the younger generation, increasingly ensnared by the grips of substance abuse. Notably, a substantial portion of those grappling with addiction belongs to the marginalized segments of society, often dwelling below the poverty line and facing unemployment. This predicament is not confined to urban centers; it permeates both urban and rural landscapes, casting a shadow over diverse communities. Should we fail to address this critical issue, the consequences for our society loom ominously. The potential fallout encompasses severe social and economic repercussions, posing a substantial threat to the very foundation of our collective well-being. Immediate attention and comprehensive interventions are imperative to safeguard the future and prevent the potential unravelling of our societal fabric.

This case study delves into the villagers of Ghamroj village, Sohna, the fictional character whose lives have been deeply impacted by addiction of alcohol, tobacco, drugs like charas, ganja and many other forms of drugs. Through case study, we explored the multifaceted nature of addiction, its underlying causes, and the challenges and triumphs experienced throughout the process.

As the addiction spiraled out of control, they faced numerous consequences, including strained relationships with family and friends, legal troubles, and deteriorating physical and mental health. Despite multiple attempts to quit or seek help, the villagers found themselves trapped in a cycle of addiction, unable to break free from its powerful grip.

Statement of the problem:

The addiction of alcohol, tobacco and drugs poses a significant challenge in rural villages, impacting individuals, families, and the overall community. The primary problem at hand is the prevalence of addiction among villagers, which manifests in various ways:



- **Lack of Awareness:** Many villagers may not fully understand the severity of addiction or recognize the available support resources.
- **Stigma:** There might be a stigma associated with addiction, making it difficult for individuals to seek help or for the community to openly discuss the issue.
- **Limited Access to Treatment:** Villages often lack adequate healthcare facilities or trained professionals to provide effective treatment and support for addiction.
- **Socioeconomic Factors:** Poverty, unemployment, and other socioeconomic issues may contribute to substance abuse, making it challenging to address addiction without addressing underlying social issues.
- **Cultural Barriers:** Cultural beliefs and practices within the village may hinder acceptance of addiction as a medical condition, complicating efforts to implement effective interventions.
- **Resistance to Change:** Some individuals or groups within the village may resist efforts to address addiction due to fear of change or reluctance to acknowledge the problem.

Addressing the problem of addiction in rural villages requires a comprehensive approach that considers the unique socio-economic, cultural, and environmental factors at play. Efforts to reduce de-addiction must involve community-based interventions, including awareness campaigns, access to treatment services, and support for families affected by addiction. By understanding the problem within the specific context of the village, we can work towards developing tailored strategies to support individuals in overcoming addiction and promoting the well-being of the entire community.

Significance of the study:

The significance of a de-addiction campaign in a village is multifold. The campaign promotes healthier lifestyles by reducing substance abuse, thereby improving the physical and mental well-being of individuals within the community. By addressing addiction, the campaign fosters stronger social bonds within the village, as individuals and families receive support and encouragement to overcome substance abuse issues together. Substance abuse can have detrimental effects on productivity and economic stability within a community. Therefore, by reducing addiction rates, the campaign contributes to improved productivity and economic development. Substance abuse often leads to increased crime rates, including theft, violence, and other illegal activities. By addressing addiction, the campaign helps in



reducing crime and creating a safer environment for all residents. Addiction can strain family relationships and lead to breakdowns in communication and support networks. The campaign aims to strengthen family bonds by providing resources and support for families affected by substance abuse. Through education, counseling, and access to treatment, the campaign empowers individuals to take control of their lives and make positive changes, leading to personal growth and selfimprovement. By promoting awareness and providing resources for prevention, treatment, and rehabilitation, the campaign lays the foundation for long-term sustainability in combating addiction within the village.

Overall, a de-addiction campaign in a village plays a crucial role in improving the quality of life, fostering community resilience, and promoting holistic development.

Objectives:

To address above mentioned issues, faculties and students of School of Basic and Applied Sciences carried out a survey in a nearby village with the following objectives:

- To assess the extent and nature of substance abuse within the village, including the types of substances being abused, prevalence rates, and demographic profiles of individuals affected.
- To raise awareness among villagers about the signs, symptoms, and consequences of substance abuse, as well as available resources for prevention, treatment, and rehabilitation.
- To provide education and information on harm reduction strategies, coping skills, relapse prevention techniques, and healthy alternatives to substance use.
- To empower individuals and families affected by addiction to make informed decisions, set achievable goals, and take steps towards recovery and positive change.

By addressing these objectives, the study aims to provide valuable insights into the problem of addiction in rural villages and inform the development of targeted interventions to address this pressing public health issue.

Methodology:

During the de-addiction campaign, the analysis of addicted people was done based on the survey form followed by counselling session of addicted people.



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Analysis of addicted people through survey:

A survey was started in Ghamroj village, Sohna, Haryana from 29th September 2023 onwards. To assess the severity of addiction in this village a comprehensive questionnaire was prepared, and the faculty members along with student volunteers of SBAS undertook a survey at Ghamroj on various visits.

First Day of De-Addiction Campaign Survey at Ghamroj (29th September 2023)

The program's initiation involved a strategic identification of key areas within the village where a concentrated presence of addicted people was anticipated.



A group photograph of students and event coordinators during the survey

To facilitate this process, the village sarpanch became a pivotal liaison, offering valuable insights to guide the dedicated team. Under the leadership of three faculty members — Dr. Rajni Gautam, Dr. Ritika Khatri, and Dr. Rishi Ranjan Kumar — accompanied by a group of 25 dedicated student volunteers, the collective effort was organized into three distinct groups. Each group, comprising approximately one faculty member and seven students, embarked on a comprehensive survey across different regions of the village.

This proactive approach included engaging with diverse demographics such as shop owners, housewives, and teenagers, and a total of 20 individuals were contacted. Through these interactions, the teams gained valuable perspectives on the prevailing circumstances, and gave an idea for the regions to be targeted in the next visit.



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Students during first day of their survey



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Villagers shared their thoughts on the addicted people



Students during first day of their survey

Second Day of De-Addiction Campaign Survey at Ghamroj (31st October 2023)



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In the subsequent phase of the program, during the second visit to the village, Dr. Ritika Khatri and Dr. Pavitra took charge as the guiding faculty members. A dedicated team of 21 enthusiastic student volunteers accompanied them, forming a cohesive unit. The focus of this visit was to cover some of the remaining areas of the village that were not surveyed during the initial visit.

Divided into three strategic groups, and supported by approximately seven students in each group, the team continued its survey in the untouched regions of the village. 31 surveys were conducted during this visit. This meticulous approach aimed to ensure a comprehensive understanding of the entire community's landscape regarding addiction. The team maintained a consistent interaction pattern, engaging with a diverse crosssection of the population.



Students during second day of their survey



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Students during the second day of their survey



A group photograph of students and event coordinators during the survey



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Student and event coordinator during second day of their survey

Third Day of De-Addiction Campaign Survey at Ghamroj (10th November 2023)

In the third visit the survey was extended to new areas, the team sought to leave no stone unturned in their commitment to addressing the pervasive issue of addiction. The team was led by Dr. Vicky Kapoor and Dr. Nitin Tyagi with 17 student volunteers. This iterative and thorough process reflected not only the dedication of the faculty members and student volunteers but also underscored the program's commitment to implementing informed and targeted interventions based on a holistic understanding of the village dynamics. A total of 45 individuals were contacted this time and their data was recorded for further analysis and to move into the next phase of this campaign.



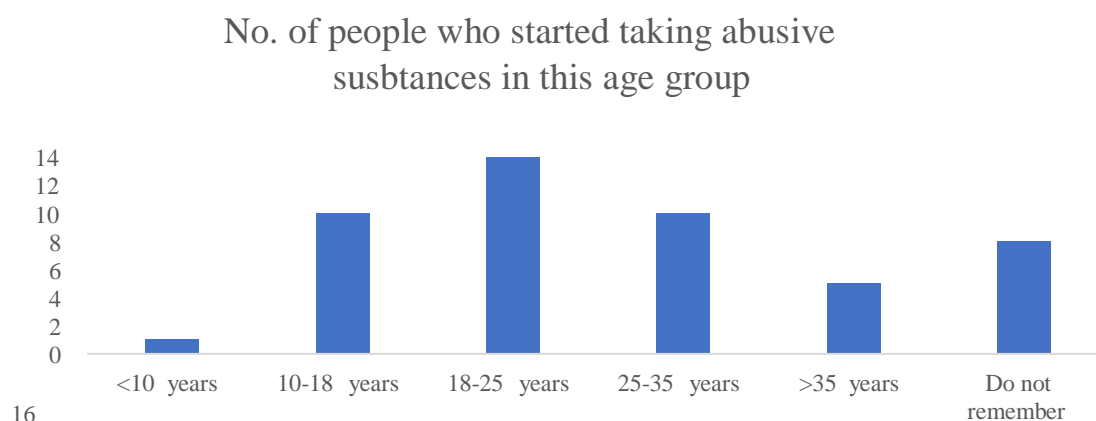
Students during third day of their survey



Student and event coordinator during third day of their survey

Analysis of Survey Data

The extended survey conducted in the Ghamroj village gave surprising as well as intriguing insights highlighting a concerning fact that majority people got addicted to alcohol, tobacco, cigarette, charas, ganja etc. when they were in the age group of 18 – 25 years. Also, some of the people started taking the abusive substances when they were in the group of 10 – 18 years. A more illustrative idea could be obtained from the graph shown in **Fig. 1**.

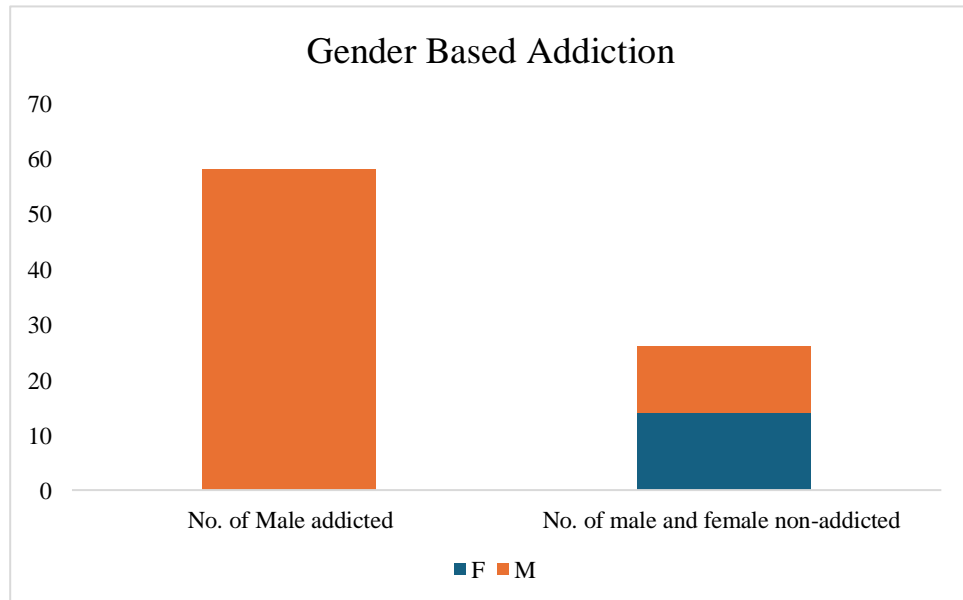


Bar graph illustrating the age wise distribution of the onset of abusive substances consumption.

Upon further analysis, it was revealed that none of the female residents in the village exhibit signs of de addiction. In stark contrast, an alarming statistic emerged, indicating that

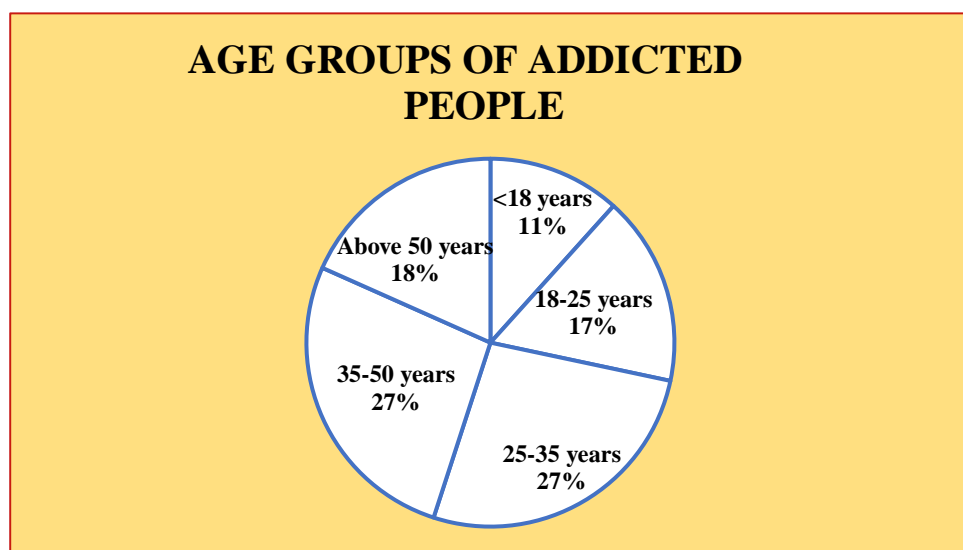


approximately 83% of the male population is grappling with addiction to either a singular substance or multiple substance (**Fig. 2**).



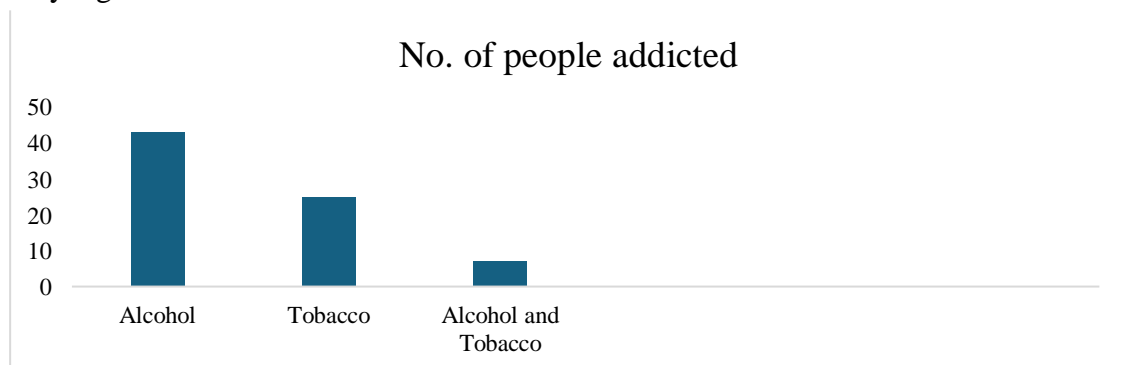
Bar graph illustrating gender-based addicted people.

Fig. 3 shows the age groups of people addicted to abusive substances. It illustrates that the majority of people addicted to abusive substances lie in the age group of 25 to 30 years. An alarming fact to be observed is that some people below the age of 18 years are also addicted to abusive substances.



Pie Chart illustrating percentage of people in various age groups addicted.

Fig. 4 presents a bar graph depicting the prevalence of addiction to different types of substances. The data underscores that a significant majority grapple with alcohol addiction, followed by individuals addicted to cigarettes and tobacco. Some exhibit poly-substance addiction, while only a small percentage of individuals are addicted to specific substances such as charas and Ganja. This visualization provides a clear overview of the varying degrees of substance addiction within the surveyed population. Maximum people were addicted to alcohol followed by cigarette and tobacco.



Bar graph illustrating the prevalence of addiction of alcohol and tobacco amongst the people of village.

Counselling therapy:

For the counselling of addicted people, the counseling sessions were organized by School of Basic and Applied Sciences. The expert and counsellor of the session was Dr. Suruchi, Assistant Professor and Counsellor, University of Delhi. The counselling session offered a powerful platform for raising awareness, providing guidance, and facilitating positive change among addicted individuals. These sessions were designed to address the unique needs and challenges of each individual, fostering understanding, motivation, and empowerment.

During the session, Dr. Suruchi established a trusting and supportive environment with the individual so that individuals could discuss their problems, share their thoughts, feelings, and experiences without fear of judgment. Dr. Suruchi conducted a comprehensive assessment to gain insight into the individual's personal history, including factors contributing to their substance abuse and specific triggers for abusive substances use. Through empathetic listening and probing questions, the expert helped the individual explore underlying issues such as trauma, stress, mental health disorders, or social influences that may be driving their addiction.

The counseling session included psychoeducation components where she provided information about addiction, its physiological and psychological effects, and the cycle of dependence. Visual aids, diagrams, and real-life examples were used to enhance understanding and illustrate the consequences of abusive substances on physical and mental health, relationships, and overall well-being.



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She collaboratively worked with the individual to explore their motivation for change and identify personal goals for recovery. Through motivational interviewing techniques, she helped the individual to recognize discrepancies between their current behavior and their desired outcomes, fostering internal motivation for positive change. She equipped the individual with practical coping strategies and relapse prevention skills to manage cravings, cope with stressors, and navigate high-risk situations. Cognitive-behavioral techniques, mindfulness practices, and stress management strategies were also introduced to help the individual develop healthier coping mechanisms. Through role-playing exercises and communication skills training, the individual learns how to effectively communicate their needs, set boundaries, and seek support from their network. To inspire hope, individuals in recovery from addiction shared their success stories. These personal narratives served as powerful testimonials, emphasizing that recovery is not only possible but achievable with the right support. Additionally, Dr. Singh utilized real-life case studies to illustrate the psychological aspects of addiction, making the information relatable to the audience. The counseling session concludes with the individual setting specific, achievable goals for their recovery journey and developing a personalized action plan.

The individual is encouraged to stay connected with their support network and engage in additional counseling or therapy as needed to maintain their sobriety and well-being.



Dr. Suruchi interacted with villagers.



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Dr. Suruchi interacted with villagers



Students taking feedback from villagers after counselling session



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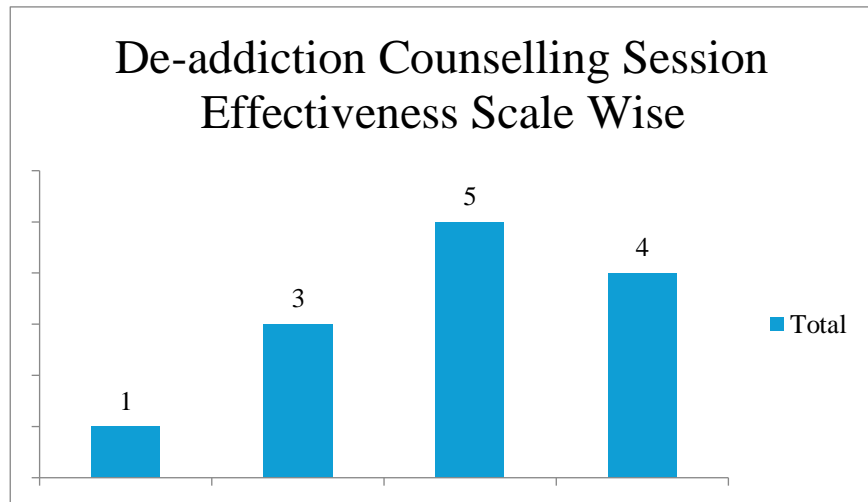
Dr. Suruchi interacted with villagers.

Impact of counselling session on addicted people:

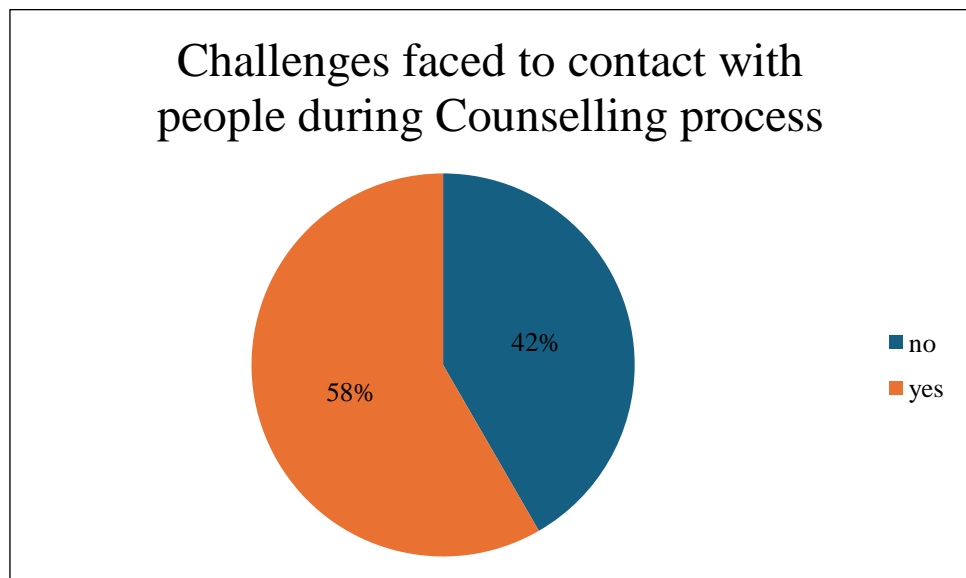
The counselling session significantly elevated awareness about the complexities of addiction within the village. Residents gained a deeper understanding of the impact on individuals and the community as a whole. The interactive nature of the session facilitated open conversations and strengthened community bonds. Residents expressed a newfound commitment to supporting those struggling with addiction and actively participating in community-led initiatives. Dr. Suruchi Singh's expertise empowered Ghamroj residents with knowledge and tools to address addiction effectively. The event catalyzed a positive shift in attitude towards seeking help and supporting those on the path to recovery.

The extended survey conducted in Ghamroj village has yielded significant insights into the patterns of addicted people. The key findings center around the effectiveness and challenges observed by individuals undergoing de-addiction treatment programs, as well as the perceived importance of ongoing support groups and aftercare. These revelations underscore the intricate nature of addiction and recovery within the Ghamroj community.

Further analysis of the data, likely presented through graphical representations, enhances our understanding by providing a detailed and visual portrayal of the addiction patterns in the village. The visual analysis not only serves to elucidate the trends but also offers a comprehensive view that can aid in tailoring interventions. By deriving insights from this data, it becomes possible to design support systems that are not only more effective but also culturally sensitive, catering to the unique needs of individuals grappling with addiction in the community.



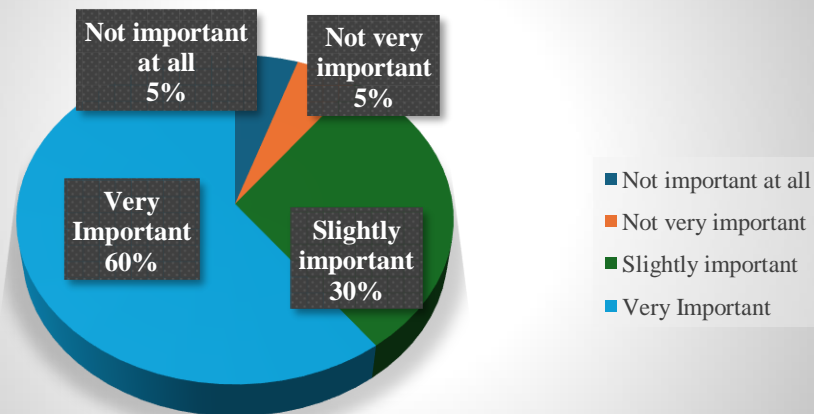
Effectiveness of the de-addiction support to villagers received to overcome addiction.



Challenges faced during de-addiction process that hindered the progress or commitment to recovery

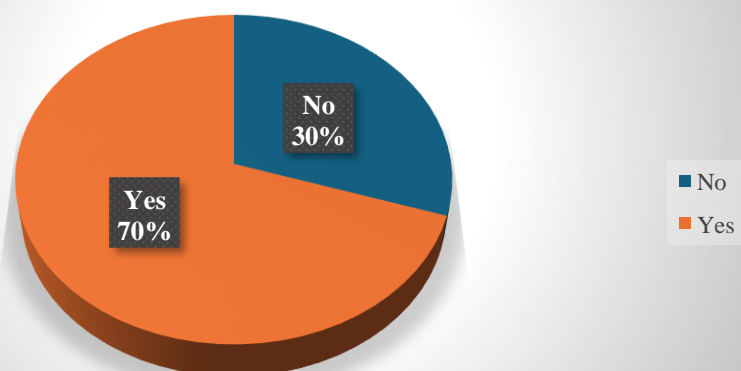


Importance of ongoing counselling session



Importance of the counselling session in maintaining long term activity

Willingness to participate in campaign



Willingness to participate in or recommend de-addiction campaign to others in the community

Conclusion:

In conclusion, the comprehensive survey conducted in the village has shed light on the intricate landscape of addiction within the community. The data reveals a concerning trend, with a



notable gender disparity and a predominant prevalence of alcohol addiction. The insights gathered from diverse age groups emphasize the urgency of targeted interventions to address the multifaceted challenges posed by substance abuse.

The absence of female addiction, while a positive aspect, calls for a nuanced exploration of underlying factors and potential vulnerabilities within the male demographic. The findings underscore the need for communitybased initiatives and support systems to tackle the pervasive issue effectively.

The counselling session yielded positive outcomes, fostering an environment of open communication and understanding. Local perspectives shared during the interactive segment provided valuable insights into the community's challenges and strengths in dealing with addiction. Attendees gained knowledge about available support services, creating a foundation for a more informed and empowered community. The interactive activities facilitated active participation, encouraging a sense of shared responsibility in addressing addictionrelated issues.

In conclusion, the Sensitization and Interactive Session on De-addiction in Ghamroj Village successfully achieved its objectives by raising awareness, dispelling misconceptions, and promoting community engagement. Dr. Suruchi's address served as a catalyst for meaningful discussions, laying the groundwork for a more supportive and informed community in the face of addiction challenges.

Acknowledgement:

We extend our sincere appreciation to the villagers of Ghamroj village, our student volunteers, Sarpanch of the village, Ms. Sudha Rani who contributed to the success of this de addiction program. Their dedication and commitment played a crucial role in transforming the lives of de addicted people. Special thanks to K R Mangalam University, and Dean SBAS for their support in the design and execution of the survey.