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Drug abuse and its impacts

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ABSTRACT

Drug refers to substances used without medical advice in order to improve mood. In modern society the numbers of such illegal substances are increasing day by day. The term "drug use" and "drug abuse" are often applied interchangeably; for example, the use of an illegal drug may be considered an abuse. The illicit drug trade is among the largest industries in the world with the major Columbian cocaine cartels and the Asian opium cartels dominating activities. A correlation has been made between the productions and trafficking of illicit drugs. Trafficking and use of illicit drugs are also inextricably linked to crime and place a tremendous burden on the economic and social conditions of the countries. Transnational nature of the problem demands cooperation at all bilateral, regional and international levels.

Key Words : Drug, , Alcohol, Marijuna, Marihuana, Dope

During the twentieth century 'drug misuse' has become widely regarded as one of the world's great social problems. It is abundantly clear that all over the world various types of drugs have increasingly been used excessively unwisely and often harmfully.¹ Drugs are chemicals, but not all chemicals are drugs. Initially, therefore, a drug might be defined as a "*substance introduced into the body knowingly and not as a food*". In current cultures, the word 'drug' is likely to evoke one of two images. One is that of medication for sickness, like antibiotics. Implicit in this concept is the idea that the drug is prescribed by some knowledgeable person such as a doctor, chemist, and that it is to be used in specified amounts and ways. The second and probably more common image is that of illegally obtained substances used irresponsibly for hedonistic purposes by people stereotyped as young, antisocial and at least amoral if not actually immoral.² According to the pharmacologist narcotics are drugs that depress the activity of the brain and central nervous system. In medicine they are used for the relief of pain; in this respect they are unsurpassed, and correctly used they are among the most valuable relievers of human suffering.³

Varieties of drugs:

The illicit drug cycle- from the source of natural plants to the chemical laboratory through the processing and manufacturing stages to consumption and the laundering of profits encompasses developing and industrialized countries alike. Drug refers to substances used without medical advice in order to improve mood⁴. In modern society the numbers of such illegal substances are increasing day by day. Some of these are:

Alcohol is one drug, which is acceptable to the majority of Western society. It differs from all the other in that it is neither illegal nor subject to medical control; yet alcohol is a drug. Now a day's drinking in excess has become one of modern society's most serious problems⁵. Alcohol dependence

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is without question the most serious drug problem in this world today. Alcohol users far outnumber those of all other drugs and are found along the entire continuum of dependence. The beverage alcohol (scientifically known as ethyl alcohol or ethanol) is produced by fermenting or distilling various fruits, vegetables, or grains. Ethyl alcohol itself is a clear, colorless liquid. Alcohol is rapidly absorbed into the bloodstream by the small intestine and less rapidly by the stomach and colon. In proportion to its concentration in the bloodstream, alcohol decreases activity in parts of the brain and spinal cord. The drinker's blood alcohol concentration depends on:

- The amount consumed in a given time
- The drinker's size, sex, body build, and metabolism
- The type and amount of food in the stomach.

General effects are a feeling of warmth, flushed skin, impaired judgment, decreased inhibitions, muscular incardination, slurred speech and memory and comprehension loss. In states of extreme intoxication, vomiting is likely to occur, possibly accompanied by incontinence, poor respiration, a fall in blood pressure, and in cases of severe alcohol poisoning, coma and death. Combining alcohol with other drugs can make the effects of these other drugs much stronger and more dangerous. Many accidental deaths have occurred after people have used alcohol combined with other drugs⁶.

GHB (Gamma-HydroxyButyerate) originally developed as an anesthetic, GHB is a naturally occurring 4-carbon molecule sold in powdered, liquid or capsule form. GHB was formerly sold by health-food stores and gyms as a sleep aid, anabolic agent, fat burner, enhancer of muscle definition and natural psychedelic. GHB was first synthesized in 1960 by a French researcher. It has been used in Europe as a general anesthetic, a treatment for insomnia and narcolepsy, an aid to childbirth and a treatment for alcoholism and alcohol withdrawal syndrome. The effects of GHB are unpredictable and very dose-dependent. The effect of heavy dose can be sleep paralysis; agitation, delusions and hallucinations have all been reported.

Cannabis (marijuana, marihuana, dope, hashish, bhang, kif, pot) is derived from the marijuana plant, cannabis sativa. This occurs in two varieties, the hemp type and the drug type. These differ in relation to the amounts of the main psycho-active ingredient deta-9-tetrahydrocannabinol (THC) that they contain. The hemp type (used for rope making) contains relatively little of the intoxicating substance, while the drug type contains far greater levels of THC. It was used medically in China 4000 years ago, and has been a popular recreational drug since at least 2000 BC in the Indian subcontinent. Subsequently its use spread to the Middle East and North Africa. There is little doubt that very often the effects of cannabis depend upon setting, expectations and mood. Many people who experiment with it report little or no effect whatever. The desired short-term reaction is 'high' or euphoria similar to mild alcohol intoxication⁸. Excessive use of cannabis may increase the heart rate as much as 50 percent, depending on the amount of THC it contains. It can also cause chest pain in people who have a poor blood supply to the heart - and it produces these effects more rapidly than tobacco smoke does.

Scientists believe that marijuana can be especially harmful to lungs because users often inhale the unfiltered smoke deeply and hold it in their lungs as long as possible. Therefore, the smoke is in contact with lung tissues for long periods of time, which irritates the lungs and damages the way they work. Marijuana has been used as an agent for achieving euphoria since ancient times; it was described in a Chinese medical compendium traditionally considered to date from 2737 B.C. Its use spread from China to India and then to North Africa and reached Europe at least as early as A.D. 500. The UN banned the non-medical/scientific research use of cannabis and opium in 1961, though no scientific evidence was advanced for the ban on cannabis⁹.

Hallucinogens:

The great civilizations offer numerous example of the use of substances producing hallucinations.

The ritual consumption of hallucinogenic mushroom in America, the use of other intoxication mushrooms by sorcerers in Asia and the use of certain plants of witchcraft in Europe are only a few examples of the diversity of the "tradition" hallucinogens, but recently the term hallucinogenic has been associated with¹⁰. *LSD (lysergic acid diethylamide)* is one of the major drugs making up the hallucinogen class. LSD was discovered in 1938 and is one of the most potent mood-changing chemicals. It is manufactured from lysergic acid, which is found in ergot, a fungus that grows on rye and other grains. LSD, commonly referred to as "acid," is sold on the street in tablets, capsules, and, occasionally, liquid form. It is odorless, colorless, and has a slightly bitter taste and is usually taken by mouth. Often LSD is added to absorbent paper, such as blotter paper, and divided per dose into small decorated squares. Most users of LSD voluntarily decrease or stop its use over time. LSD is not considered an addictive drug since it does not produce compulsive drug-seeking behavior as do cocaine, amphetamine, heroin, alcohol, and nicotine¹¹.

Opium and its derivatives:

Opium is the crudest form and also the least potent of the Opiates. Opium is the milky latex fluid contained in the un-ripened seed pod of the opium poppy. As the fluid is exposed to air, it hardens and turns black in color. This dried form is typically smoked, but can also be eaten. Opium is grown mainly in Myanmar (formerly Burma) and Afghanistan¹².

As long ago as 100 AD, opium had been used as a folk medicine, taken with a beverage or swallowed as a solid. Only toward the middle of the 17th century, when opium smoking was introduced into China, did any serious addiction problems arise. In the 18th century opium addiction was so serious there that the Chinese made many attempts to prohibit opium cultivation and opium trade with Western countries. At the same time opium made its way to Europe and North America, where addiction grew out of its prevalent use as a painkiller. Opiates first produce a feeling of pleasure and euphoria, but with their continued use the body demands larger amounts to reach the same sense of well-being. This is one of the primary reasons why an opium addiction may develop quickly. Although the use of solutions of opium has been replaced by morphine, heroin and codeine, mixtures containing opium are still prescribed, mainly as bowel sedatives for the relief of colic and diarrhea¹³. Opium production, while significant, is now highly concentrated in Afghanistan's southern provinces. Indeed, the Helmand province is on the verge of becoming the world's biggest drug supplier, with the dubious distinction of cultivating more drugs than entire countries such as Myanmar, Morocco or even Colombia. Curing Helmand of its drug and insurgency cancer will rid the world of the most dangerous source of its most dangerous narcotic, and go a long way to bringing security to the region¹⁴. In 2007, Afghanistan alone accounted for over 92% of global opium production¹⁵.

Morphine is most prevalent, which makes up a tenth of the opium. Although morphine is not the only active ingredient of opium it is recognized that the main effects of opium are those of morphine. Extraction of morphine reduces the bulk of the original dried juice to a tenth while retaining the main characteristics properties. This drug, the main alkaloid of opium, was isolated early in the nineteenth century. The morphine addiction has greatly declined, solely because of its replacement by heroin, which has less unpleasant side effects and produces pleasanter sensations. Morphine provides sedation, mental detachment, and relief from pain. When it is given by mouth the effects are slow, but with an injecting under the skin they are evident in 15 minutes. Injection into a vein produces immediate effects. The immediate effects in a non-addict frequently consist of nausea, vomiting, sweating, and itching. In the addict there is a short period of overactivity and talkativeness followed by drowsiness and under activity¹⁶.

Heroin is now regarded as the most dangerous of all existing drugs of addiction. It was discovered in 1898 and is derived from morphine by a synthetic process requiring considerable skill. It is an addictive drug, and its use is a serious problem in whole of the world. Short-term effects include a

surge of euphoria followed by alternately wakeful and drowsy states and cloudy mental functioning. Long-term users may develop collapsed veins, liver disease, and lung complications. Its withdrawal symptoms usually occur six to twelve hours after the last dose. They range from minor discomfort, similar to that from a cold, to cramps, nausea, sweating, diarrhea and insomnia¹⁷. Heroin is usually injected, sniffed/snorted or smoked. Typically, a heroin abuser may inject up to four times a day. Intravenous injection provides the greatest intensity and most rapid onset of euphoria (7 to 8 seconds), while intramuscular injection produces a relatively slow onset of euphoria (5 to 8 minutes). When heroin is sniffed or smoked, peak effects are usually felt within 10 to 15 minutes. After the initial effects, abusers usually will be drowsy for several hours. Mental function is clouded by heroin's effect on the central nervous system. Cardiac function slows. Breathing is also severely slowed, sometimes to the point of death. Heroin overdose is a particular risk on the street, where the amount and purity of the drug cannot be accurately known¹⁸.

Codeine is another derivative of opium, closely related chemically to morphine. Its general effects are the same as those of morphine, but much less intense. Codeine exists in medicine as a constituent of a number of painkilling remedies, particularly headache tablets, and is a constituent of a number of effective cough mixtures.

Stimulants:

The drugs in this group directly stimulate the brain and central nervous system. For this reason many stimulant drugs are referred to colloquially as "pep pills". Mild stimulants have a general tonic effects, inducing wakefulness and alertness with a general feeling of wellbeing. Mild stimulant is widely accepted in society through beverages such as tea, coffee, and Coca-Cola¹⁹. OxyContin is the brand name for an opioid analgesic containing the active ingredient oxycodone. OxyContin is a legal narcotic that is available, by prescription, to treat severe pain. OxyContin is a controlled-release medication that, when used correctly, provides extended relief of pain associated with cancer, back pain or arthritis. However, often when the drug is abused, the tablets are crushed and snorted, chewed, or mixed with water and injected, hence eliminating the time-release factor and allowing for a quick and intense rush to the brain. OxyContin is highly addictive - so higher doses of the drug must be taken when a tolerance develops. Illicit users of the drug have risen drastically and steadily over the last few years. The most serious risk associated with OxyContin is respiratory depression. Because of this, OxyContin should not be combined with other substances that slow down breathing, such as alcohol, antihistamines (like some cold or allergy medication), barbiturates or benzodiazepines. Other common side effects include constipation, nausea, sedation, dizziness, vomiting, headache, dry mouth, sweating and weakness. Toxic overdose and/or death can occur by taking the tablet broken, chewed, or crushed.

Amphetamines are synthetic drugs. They were discovered in 1930, and they account for a very large proportion of current drug abuse, and are second only to the opiates in the seriousness of the problems they create. Amphetamines are man-made drugs that have a bitter taste. Amphetamines can be snorted, swallowed, injected, dissolved in a drink or smoked. Amphetamines can also come in a liquid form, which is injected into the body. The most common form of the drug is amphetamine sulphate, commonly known as Speed. The purity of this drug is usually only about 5%, with the rest mixed with other white powders, ranging from talcum powder and toilet cleaner.³ The regular use of amphetamines means the body develops a tolerance, and larger doses of the drug will be required to achieve the same high, which can lead to addiction. Anybody who takes amphetamines for long enough may suffer from paranoia, delusions and hallucinations, as well as risking infections such as hepatitis and HIV through contaminated needles. Larger doses may cause dry mouth, sweating, shakiness, blurred vision and headache. Extremely large quantities may lead to flushing, pallor, changed and possibly irregular heartbeat, loss of co-ordination and sometimes to psychotic or irrational

behaviour. Excessive amphetamine use has, rarely, led to fatalities due to burst blood vessels in the brain and heart failure²⁰.

The *ATS* market continues to stabilise over the medium term. UNODC estimates that ATS manufacture world-wide could have ranged between 330 metric tons to 770 metric tons in 2006, with a mid-point estimate of 494 metric tons. It appears that global manufacture may be increasing somewhat for the amphetamines group and decreasing for the ecstasy group. In 2006, it is estimated that methamphetamine accounted for 68% of the amphetamines group²¹. *MDMA or ecstasy* is a synthetic drug. MDMA possesses chemical variations of the stimulant amphetamine or methamphetamine and a hallucinogen, most often mescaline. Ecstasy or MDMA is a human-made drug that acts as a stimulant and a hallucinogen. It is taken orally as a capsule or tablet. Short-term effects include feelings of mental stimulation, emotional warmth, enhanced sensory perception, and increased physical energy. Adverse health effects can include nausea, chills, sweating, teeth clenching, muscle cramping and blurred vision. Recent research findings also link MDMA use to long-term damage to those parts of the brain critical to thought and memory. It is thought that the drug causes damage to the neurons that use the chemical serotonin to communicate with other neurons.Drug use trends of Western Europe are largely stable but continue growing in several East and South-East European countries.

Phenmetrazine:

This drug is chemically quite different from the amphetamines, but is virtually identical in that it creates the same reactions and problems in the same degree. Coacine is derived from the leaves of the coca bush, which grows most abundantly in Peru, Bolivia, and Java. It was isolated from this plant in 1885 and is a white powder with a bitter taste²². It is a powerfully addictive stimulant drug. Indigenous people in the Andes have chewed the coca leaf for centuries. The plant is grown primarily in Bolivia, Colombia and Peru, with Peru having the largest plant production. Smoking of coca paste, often mixed with tobacco or cannabis (basuco, pitillo etc.) is now frequent among the youth of Bolivia, Colombia and Peru. Cocaine is the principal active ingredient of the coca leaf, extracted from leaves and used to make other forms of the drug such as coca paste or crack. The largest single market for cocaine is the United States, which saw sharp increases in the 1980s²³. The powdered, hydrochloride salt form of cocaine can be snorted or dissolved in water and injected. This form of cocaine comes in a rock crystal that can be heated and its vapors smoked. The term "crack" refers to the crackling sound heard when it is heated. Physical effects of cocaine use include constricted blood vessels, dilated pupils, and increased temperature, heart rate, and blood pressure. The duration of cocaine's immediate euphoric effects, which include hyperstimulation, reduced fatigue, and mental clarity, depends on the route of administration. Different routes of cocaine administration can produce different adverse effects. Regularly snorting cocaine, for example, can lead to loss of sense of smell, nosebleeds, problems with swallowing, hoarseness, and an overall irritation of the nasal septum, which can lead to a chronically inflamed, runny nose. Ingested cocaine can cause severe bowel gangrene, due to reduced blood flow. And, persons who inject cocaine have puncture marks and "tracks," most commonly in their forearms. Intravenous cocaine users may also experience an allergic reaction, either to the drug, or to some additive in street cocaine, which can result, in severe cases, in death. Because cocaine has a tendency to decrease food intake, many chronic cocaine users lose their appetites and can experience significant weight loss and malnourishment.¹ The first encouraging sign is that coca cultivation in the Andean countries continues to fall, driven by significant declines in Colombia. Global demand for cocaine has also stabilized, although the decline in the United States is offset by alarming increases in some European countries. Particularly Most of the world's cocaine comes from coca leaf cultivated in Colombia, Peru and Bolivia. The global area under coca cultivation fell by 29 per cent to some 156,900 hectares between 2000-2006, largely due to reductions of coca cultivation in Colombia. The areas under coca cultivation in Peru and Bolivia increased over this period but remained significantly below

the levels reported a decade earlier²⁴.

What determines the observable drug effect?:

The nature of drug effects varies in size and quality with four major factors: dose, time since the drug was taken, the purity of the drug and status of the time²⁷. *Dose*-Other things being equal, the larger the dose the greater the effect. However, this is somewhat modified by the way the drug is given. Smaller doses are required if the drug is injected directly into the bloodstream. *Time since the drug was taken-* In general, symptoms diminish with time, but the various effects of a drug may show quite different time courses. For example, the physiological effects of the hallucinogenic drugs peak about two hours after ingestion and are generally gone after three hours. The psychedelic effects peak four to five hours after ingestion and decline after about eight hours. *Purity of the drug* Multiple drug administration is becoming the rule. Such use may be deliberate. 'Street' drugs are almost never what they are advertised to be. Thus, two-thirds of drugs sold as mescaline or psilocybin are LSD; THC, the active principle of marijuana, is almost never available and phencyclidine is the usual substitute. *Status of the user-* This includes all aspects of functioning, both physical and psychological. Such factors as age, sex, genetic background and presence or absence of disease interact in significant ways with the action of drugs to produce unique symptoms.

Drug abuse and its social impacts:

Virtually every social group has its own pattern of drug use, either for purely casual, social purposes or for some more ritualuised reasons. In western cultures the convivial consumption of alcohol is an important part of most social gatherings²⁸. The global changes, which have allowed people, goods and money to move from one country to other, cheaply and easily, have also had other consequences. They have made the differences and inequalities around the world more apparent and more unacceptable²⁹. Rapid social, economic and technological change may, under certain circumstances, weaken the sense of family and reduce the sense of belonging to other people, groups and places. Stability of relationships, environment and expectations is a powerful force in helping people manages their lives, especially important for children and young adults.

The family is often viewed as the basic source of strength, providing nurturance and support for its individual members as well as ensuring stability for the community and culture. Rapid social, economic and technological change may, under certain circumstances, weaken the sense of family and reduce the sense of belonging to other people, groups and places. Stability of relationships, environment and expectations is a powerful force in helping people manages their lives, especially important for children and young adults. Family factors that may lead to or intensify drug use are thought to include prolonged or traumatic parental absence, harsh discipline, and failure to communicate on an emotional level, chaotic or disturbed members and parental use of drugs. Lack of household stability, income or employment for a parent may increase stress on the family and its vulnerability, pushing marginal individuals to find "solutions" or solace in alcohol or drugs³⁰. Although drug abuse is common among all age groups, it occurs more frequently among young adults. Increases were noted in illicit drug demand in most countries in the Americas, in eastern Europe and Asia, where it was attributed to the socioeconomic crisis affecting these regions and, in particular, high unemployment.

The term "drug use" and "drug abuse" are often applied interchangeably; for example, the use of an illegal drug may be considered an abuse. For many people who use marijuana on occasion in order to achieve a state of euphoria, pleasure or relaxation it may be argued that they do not abuse the substance. Other perspectives of abuse rely on the notion of potential or actual harm.² The essential feature of "substance abuse" is a maladaptive pattern of substance use manifested by recurrent and significant adverse consequences related to the repeated use of substances.

Since 1997 the prevalence of illicit drug use drugs in Thailand has widened from heroin, cannabis,

and other substances to also include the use of amphetamines or 'yaba.' Between 1993 and 2001, there was a 1,000% increase in the use of this new drug. In Thailand the most common manner of administering yaba is not injecting but inhaling the fumes, a practice known as 'chasing the dragon'³¹. Globally, an estimated 72% of the world's 16.5 million opiate users use heroin (some 12 million people). UNODC estimates for Europe suggest that close to 90% of opiate users use heroin. In Asia about two thirds of all opiate users consume heroin with opium more common in rural areas and heroin more common in urban areas³². Global opiate abuse has stabilised at an estimated 15.6 million people, or 0.4 per cent of the world's population aged 15-64. Opiates continue to be the main problem drug worldwide, accounting for some 60 percent of treatment demand in Asia and in Europe. More than half of the world's opiate using population lives in Asia, with the highest levels of abuse occurring along the main drug trafficking routes out of Afghanistan. Annual prevalence of opiates, including heroin, is high in the Islamic Republic of Iran where the number of drug abusers is said to exceed 1.2 million (2.8 % of the general population aged 15-64)³³.

Illicit drug use more frequently results in problems or disease rather than death. AIDS has changed the nature and impact of drug abuse. In the illicit drug scene, the HIV virus is spread in two primary ways: first, contaminated needles or syringes are shared; secondly, infected injecting drug abusers may travel widely. Although heterosexual transmission is the major cause of AIDS in many countries. Myanmar has one of the highest HIV infection rates among IDUs in Asia. HIV prevalence among IDUs was estimated that between 150,000 to 250,000in 2000³⁴.

Drug and crime:

Drug traffic is part of this new social, economic and political environment. It is not only individualistic and entrepreneurial but the best organized of all underground and illegal activities. Researchers have found a close connection between drug abuse, criminal behaviour and social attitudes. Review of the crime/drugs literature supports three notions: heroin addicts are usually deeply involved in crime; daily opiate use increases criminality several fold; and many heroin abusers are not interested in obtaining treatment although drug treatment programmes do reduce the criminality of addicts while they are in treatment³⁵. Whatever the reason in any country, the lack of economic progress has put such countries in a financial bind and frequently placed severe restrictions on government services available to the most vulnerable segments of the population. In some cases, this has been the result of political instability, ethnic conflict, natural disasters or mismanagement of the economy. In this context, both the nation State and its individual citizens have become more vulnerable to the temptations of money from illicit drug production and trafficking. The focus of the study is, whether it is the income security associated with drug trade or some other factor responsible for opium production.

The high-risk, high-gain nature of drug trafficking is well known. Profits from the drug traffic flow back into the coffers of sophisticated criminal organizations with financial interests in other illicit areas. In some cases, political dissident groups that desire the money to support arms purchases, political insurgency or terrorism may undertake drug dealing. For example, drug enforcement efforts are often hampered by insurgent groups that are engaged in bitter and violent struggles with criminal cartels for control of the drug trade. Hence, political conflicts within and between countries, often involving dissident groups, obstruct government action. Governments that are unable to control major dissident groups representing a direct challenge to their authority are unlikely to be successful in controlling a drug trade that generates enormous amounts of money to buy influence or weapons³⁶.

Crime and drugs may be related in several ways, none of them simple. First, illicit production, manufacture, distribution or possession of drugs may constitute a crime. Secondly, drugs may increase the likelihood of other, non-drug crimes occurring. Thirdly, drugs may be used to make money, with subsequent money laundering. And fourthly, drugs may be closely linked to other major

problems, such as the illegal use of guns, various forms of violence and terrorism. Illicit traffic in drugs generates enormous profits. Funds are obtained in or converted into an international currency and then moved into financial centers, which can electronically transfer the money around the world. Empirical data suggest that drug use is both a direct and an indirect cause of crime. In the underground economy, drug use drives dealing and property crimes directly, and many acts of violent crime occur indirectly as a result of transaction disputes or marketing conflicts³⁷. It not only inherently involves violence, but may also lure other into criminal behaviour in anticipation of large profits³⁸. Illicit trafficking as such is not necessarily a new form of crime that emerged with the end of the Cold War. While insurgency and guerrilla warfare were threats that characterized the Cold War environment, it may be that terrorism and its coordinated criminal activity and drug trafficking will become a high priority national security concern in the post Cold War Period. In combination with the technological and economic advances that have been made it has become a new, dramatic and unexpected challenge. Organised crime groups have learned to penetrate legitimate businesses, and due to the large profits related with it, drug trafficking became one of their main activities.

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